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Submit 3 Copies To Appropriate District Office	State of Nev	:	\	Form C-103 Revised March 25, 1999
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and	Natural Resources	WELL API NO.	Revised March 23, 1999
District II	OIL CONSERVAT	ION DIVISION	30-045-3118	
1301 W. Grand Avenue, Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type o	f Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE L	J FEE LJ
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Ga SF-078046	s Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS				Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			DW 5 1 10	
PROPOSALS.)			BW Federal 2	9-29-8
1. Type of Well: Oil Well Gas Well X	Other			
2. Name of Operator	States /	NOV 2002	8. Well No.	
CDX Rockies, LLC		S NOV ZINZ	#101	
3. Address of Operator 679 East 2nd Ave., Ste 3 Durang	70 CO 81301	GALCO COLUMN	9. Pool name or Basin - Fruit	
4. Well Location	JO, CO 01301	t mana s	Sy Dasin - Fruit	iana i ooi
Unit Letter D: 825 feet from the North line and 772 feet from the West line				
Section 29	Township 29N	Range 8W	NMPM S	an Juan County
	0. Elevation (Show whe	ther DR, RKB, RT, GR, etc		
6466' GL				
	propiate Box to Indica	te Nature of Notice,	Report or Other D	ODT OF
NOTICE OF INTE PERFORM REMEDIAL WORK ☐ P	LUG AND ABANDON	REMEDIAL WOR	SÉQUENT REF □	ALTERING CASING
TEMPORARILY ABANDON C	HANGE PLANS	COMMENCE DR	ILLING OPNS.	PLUG AND ABANDONMENT
	MULTIPLE COMPLETION	CASING TEST A CEMENT JOB	ND 🗆	, 15, 115 61 WEIT
OTHER:		OTHER:		X
12. Describe proposed or completed	d operations. (Clearly sta	te all pertinent details, ar	nd give pertinent date	s, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompilation.				
Awaiting core and cleat analysis from orientated core to lateral modeling.				
Work to commence on or before December 15, 2002				
*				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE				
Type or print name Trudy Pingree		970-247-4	126	Teleph
(This space for State use)	1	MENTY AN A AZZ .	**************************************	NOV 97 0000
APPPROVED BY Conditions of approval, if any:	W	DEPUTY OIL & GAS I	M37ECTOR, DIST.	DATE
Communis of approval, it ally.				