Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 May 27, 2004	
District I 1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-039-	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FE	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505		6. State Oil & Gas Lease No BIA # 11).
SUNDRY NOTICES AND REPORTS ON WELLS (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 PROPOSALS.)			7. Lease Name or Unit Agreement Name JICARILLA APACHE B	
1. Type of Well: Oil Well Gas Well X Other			8. Well Number 10E	
2. Name of Operator ELM RIDGE RESOURCES, INC.			9. OGRID Number 149052	
3. Address of Operator P.O. BOX 156, BLOOMFIELD, NM 87413			10. Pool name or Wildcat OTERO GALLUP & BASIN DAKOTA	
4. Well Location	1005 c c c c COLUT	TI 10		A C/TC
Unit Letter P: 1085 feet from the SOUTH line and 1260 feet from the EAST line Section 20 Township 24N Range 5W NMPM County RIO ARRIBA				
Section 20 Township 24N Range 5W NMPM County RIO ARRIBA 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
6,655' GL Pit or Below-grade Tank Application X or Closure				
Pit type Reserve Depth to Groundwater ~390' Distance from nearest fresh water well ~1.3mi Distance from nearest surface water ~340'				
Pit Liner Thickness: mil	Below-Grade Tank: Volume		struction Material	
12. Check A	Appropriate Box to Indicate N	ature of Notice, R	leport or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING	G CASING 🗌
TEMPORARILY ABANDON PULL OR ALTER CASING	CHANGE PLANS ☐ MULTIPLE COMPL ☐	COMMENCE DRIL		
_	MOLTIFLE COMFL []	CASING/CEMENT	30B LJ	
OTHER: RESERVE PIT	leted operations (Clearly state all r	OTHER:	oive pertinent dates includin	g estimated date
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
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112345				
2005 C				
		Call Call	681 11 9 Called	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines X , a general permit or an (attached) alternative OCD-approved plan.				
SIGNATURE Craig M. C	Fiehler TITLE !	Biologist	DATE.	2/30/04
SIGNATURE Craig M. Fiehler TITLE Biologist DATE 12/30/04 Type or print name Craig M. Fiehler E-mail address: Telephone No. 505-466-8120				
A DEPONIED BY: 1 CENT TITLE GAS INSPECTOR, DIST. 518				
APPROVED BY: Conditions of Approval (if any):	TEM TITLE	Aug Hable	CIOR, DIST. DATEDATE	- FEOU