Submit 3 Copies To Appropriate District Office	State of New Me Energy, Minerals and Natu		Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-039-
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
District IV 1220 S. St. Francis Dr., 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 14E
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 Unit Letter P: 1170 feet from the SOUTH line and 790 feet from the EAST line			
Section 19		ange 5W	NMPM County RIO ARRIBA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6,585' GL			
Pit or Below-grade Tank Application or Closure Pit type Reserve Depth to Groundwater ~320' Distance from nearest fresh water well ~4245' Distance from nearest surface water ~630'			
Pit type Reserve Depth to Grounds Pit Liner Thickness: mil			ance from nearest surface water ~030

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF II PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	CHANGE PLANS	SUBS REMEDIAL WORK COMMENCE DRII CASING/CEMENT	LLING OPNS. P AND A
OTHER: RESERVE PIT	X	OTHER:	П
			ach wellbore diagram of proposed completion
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 \square or an (attached) alternative OCD-approved plan \square .			
SIGNATURE Craig M. 3	Fiehler TITLE E	Biologist	DATE 12/30/04
Type or print name Craig M. I For State Use Only	Fiehler E-mail ac	raia@permits w	Telephone No. 505-466-812
APPROVED BY: Device Conditions of Approval (if any):	y tenf TITLE	DEPUTY OIL & GAS I	MSPECTOR, DIST. # JAN - 4 2004 DATE