Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103 Revised August 1, 2011
<u>District 1</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	Energy, Minerals and Natural Resources	WELL API NO. 30-045-27573
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Sunta 1 0, 1001 07505	6. State Off & Gas Lease No. E-6633-2
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Bisti Coal 2
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🔲 Other	8. Well Number #1
2. Name of Operator Elm Ridge Exploration Co LLC		9. OGRID Number
3. Address of Operator		10. Pool name or Wildcat
PO BOX 156 Bloomfield, NM 874 4. Well Location	13	Basin Fruitland Cocl
4. Well Location Unit Letter H : 1850' feet from the North line and 790' feet from the East line		
Section 2	Township 25N Range 12W	
	11. Elevation (Show whether DR, RKB, RT, GR, etc	
	6333' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A		
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DR	
OTHER: : Closed Loo	p System Notice X OTHER:	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
Elm Ridge Exploration Co LLC Pla	ans to use a Closed loop system while doing a w	orkover on this well.
		RCVD OCT 25'13
		OIL CONS. DIV. DIST. 3
		0.51.0
Spud Date: 17 _ 7 _ 19	Rig Release Date:	
Spud Date: 12-2-19		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE	TITLE:Sr. Regulatory Supe	ervisorDATE2-5-13_
Type or print nameAmy Mackey_	E-mail address:amackey1@elmrid	lge.net PHONE: _505-632-3476
For State Use Only	/ Deputy Oil & Gas I	Inspector, Oct o o outo
APPROVED BY: A MAN	TITLEDistrict #:	<u>3 DATE</u> OCT 2 9 2013
Conditions of Approval (if any):	Pr .	