

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

**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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Explorada, Inc.		8. Farm or Lease Name Tres Cerros
3. Address of Operator P. O. Box 29, Grants, New Mexico 87202		9. Well No. 1
4. Location of well UNIT LETTER <u>L</u> <u>1731</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>21</u> TOWNSHIP <u>16N</u> RANGE <u>9W</u> NMPM.		10. Field and Pool, or Wildcat Wildcat <i>Dukato</i>
15. Elevation (Show whether DF, RT, GR, etc.) 7182 GR		12. County McKinley

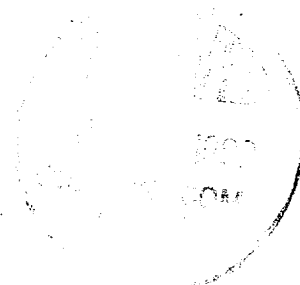
16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER _____	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Commenced drilling at 11:00 am on 3-22-82.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Twila C. Johnson</u>	TITLE <u>Geologist</u>	DATE <u>3-31-82</u>
APPROVED BY <u>Original Signed by [Signature]</u>	TITLE <u>SUPERVISOR DISTRICT #3</u>	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		