

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |  |
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>LG-9425   |                              |

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.

|                                                                                                                                                                                                          |  |                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                                         |  | 7. Unit Agreement Name                                |
| 2. Name of Operator<br>BLACK OIL, INC.                                                                                                                                                                   |  | 8. Farm or Lease Name<br>STATE - COOKIE               |
| 3. Address of Operator<br>P.O. Box 537, Farmington, NM 87499                                                                                                                                             |  | 9. Well No.<br>1                                      |
| 4. Location of well<br>UNIT LETTER <u>A</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>20N</u> RANGE <u>12W</u> N.M.P.M. |  | 10. Flow and Pool, or Wharft<br>NOSE ROCK-HOSPAN EXT. |
| 11. Elevation (Show whether DF, RT, GR, etc.)<br>6127 GR                                                                                                                                                 |  | 12. County<br>McKinley                                |

13. 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 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 <input checked="" type="checkbox"/> Perforating |

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 1103.

We have perforated this well with four holes per foot from 2170' to 2174'. The well will be swabbed and tested.

RECEIVED  
JUN 11 1987  
OIL CON. DIV.  
DIST. 3

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

SIGNED [Signature] TITLE President DATE June 10, 1987

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT 3 DATE JUN 11 1987

CONDITIONS OF APPROVAL, IF ANY: