| Submit 3 Copies To Appropriate District Office   | State of                      | New N              | lexico                        |                           | Form C               | 102  |
|--|-------------------------------|--------------------|-------------------------------|---------------------------|----------------------|------|
| District I   | Energy, Minerals              |                    |                               |                           | Revised March 25     |      |
| 1625 N. French Dr., Hobbs, NM 88240<br>District 11   |                               |                    |                               | WELL API NO.              |                      | ,    |
| 81   South First, Artesia, NM 8 82 1 0<br>District III   | OIL CONSERV                   |                    |                               | 3003922162                |                      |      |
| 1000 Rio Brazos Rd., Aztec, NM 87410   | 2040 Sc                       |                    |                               | 5. Indicate Type<br>STATE |                      |      |
| District IV<br>2040 South Pacheco, Santa Fe, NM 87505  | Santa Fe                      | e, N               | 12505" 2 3                    | 6. State Oil & G          | ias Lease No         |      |
|  |                               | A                  | Alou A                        | Jicarilla Contract #      | #111                 |      |
| (DO NOT USE THIS FORM FOR PROPO  | ICES AND REPORTS OF           | VAVELL<br>VALOR II | 2001 T                        | 7. Lease Name of          | r Unit Agreement Na  | ame: |
| (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIPROPOSALS.)  1. Type of Well:  | CATION FOR PERMIT" (FOR       | -10170             | MR-SQCIPED CO                 |                           |                      |      |
| 1. Type of Well:   |                               |                    | DIST. 3                       | 1                         |                      |      |
| Oil Well Gas Well  | Other                         |                    |                               | Jicarilla N               | ,                    |      |
| 2. Name of Operator  |                               | 016                | 1/2/2/2/2/2/                  | 8. Well No.               | ~                    |      |
| D.J. Simmons, Inc. Address of Operator   |                               |                    | 4 9 9 9 1                     | 113                       |                      |      |
| 1009 Ridgeway Place Suite 200  | , Farmington, NM 8740         | 1                  | \<br>  <sub>1</sub>           | 9. Pool name or V         |                      |      |
| Well Location  |                               |                    |                               | Lindrith Gallup/Da        | kota                 |      |
|  | 0.504                         |                    |                               |                           |                      |      |
| Unit Letter C  | 950' feet from the            | North              | line and 1775                 | feet from                 | m the West           | line |
| Section 8  | Township T24                  | N R:               | inge R4W                      | NMPM                      | C                    |      |
|  | lb. Elevation (Show who       | ther Di            | RKB, RT, GR, etc)             | TAINTFINE                 | County Rio Arriba    |      |
|  | 6704' GL                      |                    | ,                             |                           |                      |      |
| II. Check A  | ppropriate Box to Ind         | icate N            | ature of Notice, R            | eport or Other l          | Data                 |      |
| NOTICE OF IN<br>PERFORM REMEDIAL WORK [☒]  | PLICAND ABANDON               |                    | SUBS                          | EQUENT REF                |                      |      |
|  | FEOG AND ABANDON              | لــا               | REMEDIAL WORK                 |                           | ALTERING CASING      | 3 🔲  |
| TEMPORARILY ABANDON 🔲  | CHANGE PLANS                  |                    | COMMENCE DRILL                | ING OPNS.                 | PLUG AND             |      |
| PULL OR ALTER CASING   | MULTIPLE                      |                    |                               | <del></del>               | ABANDONMENT          |      |
|  | COMPLETION                    |                    | CASING TEST AND<br>CEMENT JOB | ) []                      |                      |      |
| OTHER:   |                               |                    |                               |                           |                      |      |
|  | d operations (Clearly state   |                    | OTHER:                        |                           |                      |      |
| 12. Describe proposed or complete of starting any proposed work)   | . SEE RULE 1103. For M        | an perti           | ment details, and give        | e pertinent dates, in     | ncluding estimated d | ate  |
| The state of the s |                               |                    |                               |                           |                      | on   |
| D J Simmons Inc. plans to move a wo  | ork over rig onto the well si | te and ev          | aluate the mechanical         | condition and per         | forsted production   |      |
| zones, and return these wells to produ   | cing status. We anticipate    | this work          | will begin prior to Fe        | ebruary 20, 2001.         | torated production   |      |
|  |                               |                    |                               | •                         |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  |                               |                    |                               |                           |                      |      |
|  | 1 .                           |                    |                               |                           |                      |      |
| I hereby certify that the information  | bove is true and complete     | to the be          | st of my knowledge a          | and belief                |                      |      |
| SIGNATURE // Ma/   | H. 111.                       |                    |                               |                           |                      |      |
| SIGNATURE ( ( COO)   | TI AND TI                     | TLE                | Operations Engineer           |                           | DATE <u>01/11/01</u> | _    |
| Type or print name Craig Starkey for   | Robert R. Griffee             |                    |                               | Telanho                   | one No. 326-3753     |      |
| (This space for State use)   |                               |                    |                               |                           |                      |      |
| APPROVED BY  | BY CHARLIE T. PERMIN          |                    | Pary on a gas insi            | PRUTOR, PAST. 60          | NOV -1 2001          | 4    |
| Conditions of approval, if any:  | Ti                            | rle                |                               |                           | DATE                 |      |
| 4 4 · · · · · · · · · · · · · · · · · ·  |                               |                    |                               |                           |                      |      |