

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

JAN - 6 1993

OIL CON. D.

DIST. 3

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-045-28893                                                                        |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br><br>ROPCO Fee FC 6                                          |
| 8. Well No.<br>#1                                                                                   |
| 9. Pool name or Wildcat<br>Basin Fruitland Coal                                                     |

|                                                                                                                                                                                                                             |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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. Type of Well:<br>OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER                                                                                                                    |  |
| 2. Name of Operator<br>Richardson Operating Company                                                                                                                                                                         |  |
| 3. Address of Operator<br>P. O. Box 9806 Denver, CO 80209                                                                                                                                                                   |  |
| 4. Well Location<br>Unit Letter <u>A</u> : <u>1009'</u> Feet From The <u>North</u> Line and <u>964'</u> Feet From The <u>East</u> Line<br>Section <u>6</u> Township <u>29N</u> Range <u>12W</u> NMPM <u>San Juan</u> County |  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>5413' GR                                                                                                                                                              |  |

|                                                                               |                                               |
|-------------------------------------------------------------------------------|-----------------------------------------------|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |                                               |
| NOTICE OF INTENTION TO:                                                       |                                               |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | PLUG AND ABANDON <input type="checkbox"/>     |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | CHANGE PLANS <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | OTHER: <input type="checkbox"/>               |
| SUBSEQUENT REPORT OF:                                                         |                                               |
| REMEDIAL WORK <input type="checkbox"/>                                        | ALTERING CASING <input type="checkbox"/>      |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>                              | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>                | OTHER: <input type="checkbox"/>               |

12. 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.

Pressure tested surface casing and BOP to 1500 psi for 30 min--held OK.

Drilled 6 1/4" hole to 1557' KB. Ran 36 jts of 4 1/2", 10.5#, J-55 casing. Casing landed at 1557' KB. PED of 1513' KB. Cemented with 130 sx of Class B containing 2% Sodium Metasilicate and 1/4 #/sk cello flakes. Tailed in with 100 sx of Class B containing 2% CaCl and 1/4 #/sk cello flakes. Circulated 20 bbls of cement to surface.

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

SIGNATURE Bruce E. Delventhal TITLE Agent DATE 1/4/93  
TYPE OR PRINT NAME Bruce E. Delventhal TELEPHONE NO. 326-4125

(This space for State Use)

APPROVED BY Original Signed by FRANK I. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE JAN 6 1993  
CONDITIONS OF APPROVAL, IF ANY: