

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

| |
|---|
| WELL/API NO. 30-045-29383 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name ROPCO 15 GW PC |
| 8. Well No. #2 |
| 9. Pool name or Wildcat WEST KUTZ PITCTURED CLIFFS |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5322' GR |

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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER |
| 2. Name of Operator RICHARDSON OPERATING COMPANY |
| 3. Address of Operator 1700 LINCOLN ST. SUITE 1700, DENVER, CO 80203 |
| 4. Well Location Unit Letter 0 : 476 Feet From The SOUTH Line and 1800 Feet From The EAST Line Section 15 Township 29N Range 13W NMPM SAN JUAN County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5322' GR |

11. 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"/> | | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> | |
| OTHER: <input 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.

RAN 130.6' 7" 20# J55 ST + C SURFACE CASING

CEMENTED W/150 SX 1.18 CF/SX 177 CU/FT 15.6# SLURRY CLASS B CONTAINING

2% CACI AND 1/4# SX CELLO FLAKES, DISPLACED WITH 4 BBL

FRESH WATER. GOOD RETURNS TO SURFACE W/O CEMENT 8 HOURS.

TESTED CSG TO 600 PSI FOR 1/2 HR. LEAKOFF WAS AS FOLLOWS:

ISIP 615 PSI, 5 MIN 610 PSI, 10 MIN 610 PSI, 15 MIN 610 PSI, 30 MIN 610 PSI

RECEIVED
JAN - 8 1997
OIL CON. DIV.
DIST. 3

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

SIGNATURE Mitchell J. Steinke TITLE OPERATIONS MANAGER DATE 11-22-96
(303)
TYPE OR PRINT NAME MITCHELL J. STEINKE TELEPHONE NO. 830-8000

(This space for State Use)

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE JAN - 8 1997
CONDITIONS OF APPROVAL, IF ANY: