

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. <u>30-045-07845</u>
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <u>CRAWFORD</u>
8. Well No. <u>1</u>
9. Pool name or Wildcat <u>FULCHER KUTZ PC</u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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 ☐ GAS WELL ☒ OTHER	2. Name of Operator <u>BRADLEY H. KEYES & MARGARET N. KEYES TRUST</u>
3. Address of Operator <u>P.O. BOX 1387 AZTEC, NM 87410</u>	4. Well Location Unit Letter <u>E</u> : <u>2310</u> Feet From The <u>NORTH</u> Line and <u>800</u> Feet From The <u>EAST</u> Line Section <u>30</u> Township <u>29N</u> Range <u>11W</u> NM/PM <u>SAN JUAN</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☒
	CASING TEST AND CEMENT JOB ☐
	OTHER: ☐

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.

1. T/H W/F 2 3/8" EUE WORK STRING TO 1604' - RUN 50SK CEMENT
Displace - WAIT 4 hrs. TAG ~~1499~~ 1499' - RUN 20SK CEMENT - WAIT
TAG @ 1386'

2. PERF @ 340' - INSTANT WATER FLOW CASING
HOOKED UP WON'T CIRCULATE - RUN 115SK
CEMENT WAITED TAG @ 100' - RAN 30SK CEMENT TO SURFACE

3. ERECT D-y HOLE MIL - FILLED P.T.s

RECEIVED
NOV 4 1993
OILCON. DIV.
DIST. 3

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

SIGNATURE John Cunningham TITLE AGENT DATE 11-3-93

TYPE OR PRINT NAME JOHN CUNNINGHAM TELEPHONE NO. 327-9931

(This space for State Use)

Original Signed by CHARLES GRULSON DEPUTY OIL & GAS INSPECTOR, DIST. #1 NOV - 9 1993

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: