

EXHIBIT “F”

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

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

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

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.	30 025 08841
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	011793
7. Lease Name or Unit Agreement Name	
STATE A A/C 2	
8. Well No.	54
9. Pool Name or Wildcat	
EUNICE 7 RVRS QUEEN SOUTH	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	RAPTOR RESOURCES, INC. 162791
3. Address of Operator	P.O. BOX 160430, AUSTIN, TX 78716
4. Well Location	Unit Letter 0 : 660 Feet From The S Line and 1980 Feet From The E Line Section 8 Township 22S Range 36E NMPM LEA County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" 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 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.

PLAN TO ADD ADDITIONAL PERFS THROUGH REMEDIAL WORK IN CURRENT POOL.
ADDITIONAL PERFS BEING (3331 - 3700).
REMEDIAL WORK TO BE SCHEDULED FOR JUNE-AUGUST 1999.

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

SIGNATURE Russell Douglass TITLE PRESIDENT DATE 5-25-99
TYPE OR PRINT NAME RUSSELL DOUGLASS TELEPHONE NO. (512) 478-442

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 25 1999

CONDITIONS OF APPROVAL, IF ANY: