Submit I Copy To Appropriate District	State of New Mey	viaa		Form C-103
Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised July 18, 2013	
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	-		WELL API NO. 3002	2527085
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION	DIVISION	5. Indicate Type of Lea	ase
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis PB		STATE 🔺 FEE 🗖	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NAT 87		 State Oil & Gas Lea 	se No.
87505	ICES AND REPORTS ON WEL		7. Lease Name or Unit	Agreement Name
	ICES AND REPORTS ON WEIGHT SALS TO DRILL OR TO DEEPEN OF PLU CATION FOR PERMIT" (FORM C-101) FOR	G BACK TO A R SUCH	Jal North Ra	-
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🗌 Other SWD		8. Well Number 1	
2. Name of Operator Fulfer oil and cattle llc			9. OGRID Number 141402	
3. Address of Operator			10. Pool name or Wildcat	
P.O.Box 1224, 101 E Panth	er ave, Jal NM 88252		Divonian	
4. Well Location	660 feet from the south	1 ¹ 4	1980 fact from the	West line
Unit Letter 18 : Section 7	<u>660</u> feet from the <u>south</u> Township 25 S Rar			
Section	11. Elevation (Show whether DR,	-8-	NMPM Cou	
· · · · · · · · · · · · · · · · · · ·		,,,,		
	Appropriate Box to Indicate Na		-	
				RT OF: ERING CASING
	PLUG AND ABANDON □ CHANGE PLANS □	COMMENCE DRILL		
	_	CASING/CEMENT J		
CLOSED-LOOP SYSTEM	n	OTHER:		П
13. Describe proposed or com	bleted operations. (Clearly state all poork). SEE RULE 19.15.7.14 NMAC completion.	ertinent details, and g	ive pertinent dates, inc letions: Attach wellbo	luding estimated date re diagram of
	ed on this well our intent is to rig up he well and set packer, pre test annul			
work to begain 12/12/2019				
Spud Date: 9/5/1981	Rig Release Dat	e:		
	1			•
			- 4 h - 2 - 6	
i nereby certify that the information	above is true and complete to the bes	st of my knowledge a	na benet.	
		rations MGR		12/11/2019
SIGNATURE I / LA.	TITLE Ope		DATE	12/11/2019

Type or print name Mike Dennis	E-mail address:	mdennis3082q@gmail.com	
For State Use Only			
APPROVED BY: Kary Kolenson Conditions of Approval (if any):	TITLE	nie Officie	

432-940-1890 PHONE: ____ DATE 12-11-19

APPROVED BY: <u>Many Aduren</u> Conditions of Approval (if any):