

Santa Fe Main Office Phone: (505) 476-3441  General Information Phone: (505) 629-6116  Online Phone Directory <a href="https://www.emnrd.nm.gov/ocd/contact-us">https://www.emnrd.nm.gov/ocd/contact-us</a>	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <b>Oil Conservation Division</b> <b>1220 S. St Francis Dr.</b> <b>Santa Fe, NM 87505</b>	Form C-103 August 1, 2011  Permit 403045										
		WELL API NUMBER 30-025-54335										
		5. Indicate Type of Lease State										
		6. State Oil & Gas Lease No.										
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		7. Lease Name or Unit Agreement Name BELL LAKE UNIT SOUTH										
1. Type of Well: Oil		8. Well Number 136H										
2. Name of Operator KAISER-FRANCIS OIL CO		9. OGRID Number 12361										
3. Address of Operator PO Box 21468, Tulsa, OK 741211468		10. Pool name or Wildcat										
4. Well Location Unit Letter <u>I</u> : <u>1720</u> feet from the <u>S</u> line and feet <u>385</u> from the <u>E</u> line Section <u>5</u> Township <u>24S</u> Range <u>34E</u> NMPM County <u>Lea</u>												
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3575 GR												
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____												
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table style="width: 100%;"> <tr> <td colspan="2">           NOTICE OF INTENTION TO:            PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>            TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/>            PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>            Other: _____         </td> <td>           SUBSEQUENT REPORT OF:            REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/>            COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>            CASING/CEMENT JOB <input type="checkbox"/>            Other: <b>Spud</b> <input checked="" type="checkbox"/> </td> </tr> </table>			NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <b>Spud</b> <input checked="" type="checkbox"/>							
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13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  <b>11/9/2025</b> Spudded well.												
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/>												
<table style="width: 100%;"> <tr> <td style="width: 20%;">SIGNATURE</td> <td style="width: 30%;">Electronically Signed</td> <td style="width: 20%;">TITLE</td> <td style="width: 20%;">DATE</td> <td style="width: 10%;">11/11/2025</td> </tr> <tr> <td>Type or print name</td> <td>Christina Opfer</td> <td>E-mail address</td> <td>christinaO@kfoc.net</td> <td>Telephone No. 918-491-4468</td> </tr> </table>			SIGNATURE	Electronically Signed	TITLE	DATE	11/11/2025	Type or print name	Christina Opfer	E-mail address	christinaO@kfoc.net	Telephone No. 918-491-4468
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