

Submit 1 Copy To Appropriate District Office  
**District I – (575) 393-6161**  
 1625 N. French Dr., Hobbs, NM 88240  
**District II – (575) 748-1283**  
 811 S. First St., Artesia, NM 88210  
**District III – (505) 334-6178**  
 1000 Rio Brazos Rd., Aztec, NM 87410  
**District IV – (505) 476-3460**  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

**State of New Mexico**  
**Energy, Minerals and Natural Resources**

**Form C-103**  
 Revised July 18, 2013

**OIL CONSERVATION DIVISION**  
**1220 South St. Francis Dr.**  
**Santa Fe, NM 87505**

<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.) <b>1. Type of Well:</b> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		<b>WELL API NO.</b> 30-025-54123
<b>2. Name of Operator</b> Kaiser-Francis Oil Company		<b>5. Indicate Type of Lease</b> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
<b>3. Address of Operator</b> P.O. Box 21468, Tulsa, OK 74121		<b>6. State Oil &amp; Gas Lease No.</b>
<b>4. Well Location</b> Unit Letter <u>I</u> : <u>1630</u> feet from the <u>South</u> line and <u>385</u> feet from the <u>East</u> line Section <u>5</u> Township <u>24S</u> Range <u>34E</u> NMPM County <u>Lea</u>		<b>7. Lease Name or Unit Agreement Name</b> Bell Lake South State Com
<b>11. Elevation (Show whether DR, RKB, RT, GR, etc.)</b> 3575' GR		<b>8. Well Number</b> 135H
<b>12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</b>		<b>9. OGRID Number</b> 12361
<b>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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.</b>		<b>10. Pool name or Wildcat</b> Bell Lake; Bone Spring, South

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
 DOWNHOLE COMMINGLE ☐ CLOSED-LOOP SYSTEM ☐

OTHER:

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPS ☒ P AND A ☐  
 CASING/CEMENT JOB ☐  
 OTHER: ☐

**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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.**

Kaiser-Francis Oil Company requests to update 30-025-54123 to adhere to NMOCD naming conventions.

Current Well Name: Bell Lake Unit South 135H

Requested Well Name: Bell Lake South State Com 135H

**Spud Date:** 10/1/2025 **Rig Release Date:** 10/13/2025

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

**SIGNATURE** *Christina Opfer* **TITLE** Regulatory Manager **DATE** 11/21/2025  
**Type or print name** Christina Opfer **E-mail address** [ChristinaO@kfoc.net](mailto:ChristinaO@kfoc.net) **PHONE** 918-491-4468

For State Use Only

**APPROVED BY:** \_\_\_\_\_ **TITLE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Conditions of Approval (if any):**

<b>C-102</b>  Submit Electronically VIA OCD Permitting	State of New Mexico Energy, Minerals & Natural Resources Department <b>OIL CONSERVATION DIVISION</b>		Revised July 9, 2024		
			Submittal Type:	<input type="checkbox"/> Initial Submission	
				<input checked="" type="checkbox"/> Amended Report	
				<input type="checkbox"/> As Drilled	

**WELL LOCATION INFORMATION**

API Number: 30-025-54123	Pool Code: 98264	Pool Name: Bell Lake; Bone Spring, South
Property Code: <b>338287</b>	Property Name: Bell Lake South State Com	Well Number: 135H
OGRID No.: 12361	Operator Name: Kaiser-Francis Oil Company	Ground Level Elevation: 3575
Surface Owner: <input type="checkbox"/> State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> Tribal <input type="checkbox"/> Federal		Mineral Owner: <input checked="" type="checkbox"/> State <input type="checkbox"/> Fee <input type="checkbox"/> Tribal <input type="checkbox"/> Federal

**Surface Location**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
I	5	24S	34E		1630 FSL	385 FEL	32.2438156	-103.4847195	Lea

**Bottom Hole Location**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
A	32	23S	34E		25 FNL	1177 FEL	32.2682732	-103.4873280	Lea

Dedicated Acres 479.76	Infill or Defining Well Infill	Defining Well API 30-025-46625	Overlapping Spacing Unit (Y/N) Y	Consolidation Code C
Order Numbers: R-14600			Well setbacks are under Common Ownership: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**Kick Off Point (KOP)**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
I	5	24S	34E		1630 FSL	385 FEL	32.2438156	-103.4847195	Lea

**First Take Point (FTP)**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
H	5	24S	34E		2540 FNL	1177 FEL	32.2468515	-103.4872886	Lea

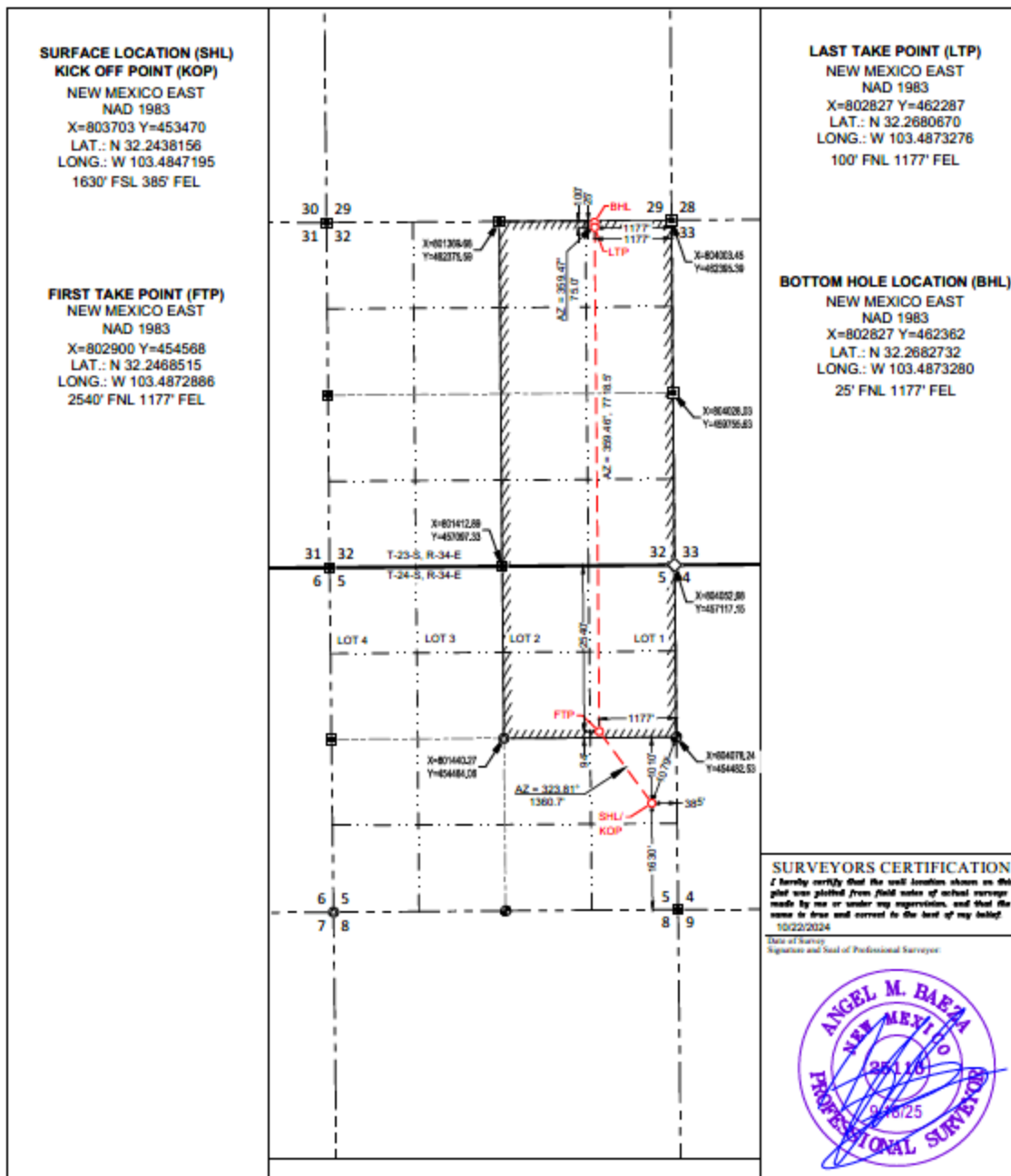
**Last Take Point (LTP)**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
A	32	23S	34E		100 FNL	1177 FEL	32.2680670	-103.4873276	Lea

Unitized Area or Area of Uniform Interest: UNIT	Spacing Unit Type <input checked="" type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	Ground Floor Elevation: 3575
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OPERATOR CERTIFICATIONS		SURVEYOR CERTIFICATIONS	
<p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and, if the well is a vertical or directional well, that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of a working interest or unleased mineral interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i></p> <p><i>If this well is a horizontal well, I further certify that this organization has received the consent of at least one lessee or owner of a working interest or unleased mineral interest in each tract (in the target pool or formation) in which any part of the well's completed interval will be located or obtained a compulsory pooling order from the division.</i></p>		<p><i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i></p>	
Signature: <b>Christina Opfer</b>		Signature and Seal of Professional Surveyor	
Printed Name: Christina Opfer		Certificate Number	Date of Survey
Email Address: christinao@kfoc.net			

*Note: No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.*



Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/ocd/contact-us>

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 528851

CONDITIONS

Operator: KAISER-FRANCIS OIL CO PO Box 21468 Tulsa, OK 741211468	OGRID: 12361
	Action Number: 528851
	Action Type: [C-103] NOI Change of Plans (C-103A)

CONDITIONS

Created By	Condition	Condition Date
matthew.gomez	Property code is now 338287.	12/15/2025
matthew.gomez	All previous COA's still apply.	12/15/2025