| Submit 3 Copies To Appropriate District Office | State of New Mexico | | | Form C-103 | | |
|---|--|----------------|------------------------------|---|------------------------------------|--|
| <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natural Resources | | | WELL API NO | May 27, 2004 D. 20,015,22262 | |
| District II 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | 5. Indicate Ty | 30-015-33362 | |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STATE | | |
| District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa Fe, NM 87505 | | | 6. State Oil & | Gas Lease No. | |
| 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 | | | | 7. Lease Name POKER LAKE | e or Unit Agreement Name E UNIT | |
| PROPOSALS.) 1. Type of Well: Oil Well | Gas Well Other RECEIVED | | | 8. Well Number 192 Q | | |
| 2. Name of Operator Bass Enterprises Production Co. 3. Address of Operator P. O. Boy 2760 | | | | 9. OGRID Number 001801 | | |
| 3. Address of Operator P. O. Box 2760 Midland, TX 79702 | | | Polot 11 Green | 10. Pool name or Wildcat NASH DRAW - DELAWARE | | |
| 4. Well Location | | | | TOTAL DIGIT | W - DEEN WARE | |
| Unit Letter L : | feet from the _ | - | line and380 | | from the <u>WEST</u> line | |
| Section 8 | Township 24S 11. Elevation (Show whe | | E 30E KB, RT, GR, etc.) | NMPM | CountyEDDY | |
| Pit or Below-grade Tank Application 🔲 | | | | | | |
| Pit type DRILLING Depth to Groundw | rater_>100' Distance from near | est fresh wate | r well <u>>200'</u> Dista | ance from nearest s | surface water_>1000' | |
| Pit Liner Thickness: 12 mil | Below-Grade Tank: Volu | ıme 7300 | bbls; Cou | nstruction Materia | I SYNTHETIC | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | | |
| | ITENTION TO: | | | | REPORT OF: | |
| PERFORM REMEDIAL WORK TEMPORARILY ABANDON | PLUG AND ABANDON CHANGE PLANS | | EMEDIAL WORK OMMENCE DRIL | | ALTERING CASING P AND A | |
| PULL OR ALTER CASING | MULTIPLE COMPL | = 1 | ASING/CEMENT | | PANDA | |
| OTHER: | | | THER:PIT CLOS | SURF | X | |
| 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. | | | | | | |
| PIT WAS CLOSED 10/04/05, PEI | R PLAN APPROVED ON (| 08/03/05. | | | | |
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| 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 [X], a general permit \square or an (attached) alternative OCD-approved plan \square . | | | | | | |
| SIGNATURE (inde | Sool T | TTLE Produ | ction Clerk | | DATE 03/09/2006 | |
| Type or print name Cindi Goodmar For State Use Only | E | E-mail addre | ss:cdgoodman@ | basspet.com | Telephone No. (432)683-2277 | |
| APPROVED BY: | T | TTLE | | | DATE TO SOME | |
| Conditions of Approval (if any): | | Ac | cepted for record | - NMOCD | MAK I O ZUUU | |