| Submit 3 Copies To Appropriate District | State of New Mexico | | | | Form C-103 |
|---|--|-------------------------|--------------------------|-------------------------|------------------------------------|
| Office <u>District I</u> | Energy, Minerals and Natural Resources | | | | May 27, 2004 |
| 1625 N. French Dr., Hobbs, NM 88240 District II | | | | WELL API NO. 3001504341 | |
| 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | 5. Indicate Type | of Lease |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STATE | FEE |
| District IV | Santa Fe, NM 87505 | | | 6. State Oil & G | as Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | |
| SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOSITION DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) | CES AND REPORTS ON | WELLS | 0021 | 7. Lease Name of | r Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSE DIFFERENT RESERVOIR LISE "APPLIC | JALS TO DRILL OR TO DEEP LATION FOR PERMIT" (FORM | EN OR PLA 4 C-10 MF0 | GGBACKTOA7 R SUCH ₹.5 | GRAYBURG JA | CKSON UNIT |
| · — | | /SV. | A 5 | 8. Well Number | |
| 1. Type of Well: Oil Well | Gas Well Other | 255 | 7006 | 4 | |
| 2. Name of Operator | | 24 | RECEIVED | % OGRID Num | ber |
| ASHER ENTERPRISES | | 18 | OCD - ARTESIA | 149538 | YYY*1 1 4 |
| 3. Address of Operator PO BOX 423 ARTESIA, NM 882 | 10 | 27.72 | OCD 7 | Sio. Pool name of GBJSA | r Wildcat |
| 4. Well Location | 10 | <u></u> | <u> </u> | UODISA | |
| 1 | 66 C feet from the | 5. | 6/8/419191917 | GGC feet fro | om the Essi line |
| Section 26 | Township | | Range 30E | NMPM | County |
| Section 26 | 11. Elevation (Show wh | | | | County |
| 。 第一章 | in Diovation (S/101/ /// | | , 1412, 111, 314, 500 | | |
| Pit or Below-grade Tank Application O | r Closure 🗌 | | | | |
| Pit typeDepth to Groundwa | aterDistance from nea | rest fresh v | vater well Dis | stance from nearest sur | face 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 | | | | | |
| NOTICE OF IN | TENTION TO | | l cur | SEQUENT RE | DODT OF: |
| NOTICE OF IN PERFORM REMEDIAL WORK □ | PLUG AND ABANDON | | REMEDIAL WOR | | ALTERING CASING |
| TEMPORARILY ABANDON | CHANGE PLANS | | | ILLING OPNS. | P AND A |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/CEMEN | IT JOB | |
| OTHER: | | П | OTHER: | | |
| 13. Describe proposed or comp | | | | | |
| of starting any proposed wo | rk). SEE RULE 1103. F | or Multip | le Completions: A | ttach wellbore diag | ram of proposed completion |
| or recompletion. | | | | | |
| PA PROCEDURE | | | | | |
| | | | | | |
| 1) MIRU – STEEL PIT – PLU | | | | | BING |
| 2) RIH GAUGE RING TO 3210' – SET CIBP @ 3210' – 35'(6 SXS) CEMENT ON TOP 3) RIH CIRCULATE 10# MUD – SPOT 100' (25 SXS) PLUG IN CASING @ 1382' - POOH | | | | | |
| 4) PERFORATE @ 575' -SQUEEZE (35 SXS) @ 575'-475' & TAG | | | | | |
| 5) PERFORATE @ 60' SQZ. (20 SXS) TO SURFACE – CUT OFF WELLHEAD-ANCHORS | | | | | |
| 6) EMPTY PIT & COVER CE | LLAR – INSTALL DRY | HOLE N | MARKER-RIG DO | WN | |
| 7) I hereby certify that the information | ahove is true and complet | e to the h | est of my knowlede | no and helief I form | her certify that any nit or helow. |
| grade tank has been/will be constructed or | | | | | |
| | | | 2 1 | | 7-19 3 |
| SIGNATURE Surgan | | ritle <u>/</u> | THE T | | DATE 7-28-06 |
| Type or print name | | E-mail ac | ldress: | т | elephone No. |
| For State Use Only | | | | - | 4 |
| A PDD OLIED DV | | ndition | a1. | | D 4 TF |
| APPROVED BY: Conditions of Approval (if any): | -CD approval co | BLW- | | | DATE |
| Conditions of rapproval (it any). | OCD wist meet | d obta | in | | |
| APPROVED BY: Conditions of Approval (if any): OCD approval conditional. OCD approval conditional. Well must meet BLM Well must meet and obtain Requirements and obtain | | | | | |
| | Require androva | <u>le</u> | | | |
| | Requirements Their approva | | | | |

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