Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103 Revised March 25, 1999
District I	Energy, Minerals and Natural	Resources	WELL API NO.	
1625 N. French Dr., Hobbs, NM 87240 District II	OW. CONCERNATION I	NUCION	W22211110	30-015-32705
811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION			5. Indicate Type of	I
District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 South Pacheco South Pacheco			STATE FEE X	
District IV 2040 South Pacheco, Santa Fe, NM 87505	Santa Fe, NM 8750	13	6. State Oil & Ga	s Lease No.
SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOSITION DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.) 1. Type of Well: Oil Well X Gas Well	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PH ATION FOR PERMIT" (FORM 230)	UG BACK TO A	7. Lease Name or U JUNEAU 31 FE	Unit Agreement Name E COM
2 Name of Ownerstan	DUSTRIES, INC. $\stackrel{\circ}{\circ}_{0}$ $O_{CD}^{RE}CA$	2003	8. Well No. #1	
3. Address of Operator P.O. BO ARTESI	<u> </u>	167	9. Pool name or W CARLSBAD, MO	l l
4. Well Location Limit Letter I 1980 feet from the SOFERIZATION and 660 feet from the WEST line				
Unit Letter L: 1980 feet from the SOFFH 7170 line and 660 feet from the WEST line				
Section 31	Township 21S R	ange 28E	NMPM EDDY	County
	10. Elevation (Show whether DR			
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN CEMENT JOBS	ID	7.67.878 GTM.211
OTHER:		OTHER: TD AND	RUN PRODUCTIO	ON CASING X
	ted operations. (Clearly state all per). SEE RULE 1103. For Multiple C			
10-6-03 DRILLERS TD 12,230';	LOGGERS TD 12,237'			
STAGE 1: 1000 SXS CL	52') 5-1/2" 17# P-110 AND N-80 (LASS "C". CIRCULATED 80 SXS 5-65-6) "C" AND TAIL WITH 100	S OFF DV TOOL.		ET AT 9,256.48'.
RANDY DUTTON NOTIFIED N	MOCD			
I hereby certify that the information	on above is true and complete to the	best of my knowledge	ge and belief.	
SIGNATURE SAMMAL	. (falomin TITLE	ENGR/LAND TEC	CHNICIAN	DATE 10/09/2003
Type or print name HANNAH P	ALOMIN		Telep	hone No. (505)748-4288
(This space for State use)				OCT 1 6 200
APPROVED BY FOR Conditions of approval, if any:	RECORDS ONLY TITLE			_DATE