

Submit 3 Copies To Appropriate District Office
 District I
 1625 N French Dr, Hobbs, NM 88240
 District II
 1301 W Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources



Form C-103
 May 27, 2004

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

2008 JAN 24 PM 12:00

WELL API NO. 30-D15-22661

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
GOURLEY FEDERAL

8. Well Number 4

9. OGRID Number 152098

10. Pool name or Wildcat

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-103) FOR SUCH PROPOSALS)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator KIMLAR OIL COMPANY, INC.

3. Address of Operator P.O. BOX 1217
 KERMIT, TX. 79745

4. Well Location
 Unit Letter _____ : _____ feet from the _____ line and _____ feet from the _____ line
 Section 31 Township 22S Range 28E NMPM _____ County EDDY

FEB 04 2008
 OGD ARTESIA

Pit or Below-grade Tank Application or Closure

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

WE ARE GETTING SOIL SAMPLES TAKEN WEEK OF JAN. 25 AND ONCE WE HAVE RECEIVED THE ANALYSIS FROM LAB, WE WILL BEGIN CLEANUP. WE WILL REMOVE CONTAMINATED SOIL AND BACKFILL WITH CLEAN MATERIAL, UNLESS WE HAVE TO USE 'BUGS' ON ROCKY AREA.

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 , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Becky Nell TITLE Secretary DATE 1/16/08

Type or print name _____ E-mail address: _____ Telephone No. _____

For State-Use Only: _____ Accepted for rec. _____
 NMOCD

APPROVED BY: _____ TITLE _____ DATE FEB 14 2008

Conditions of Approval (if any): _____