

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 87240  
 District II  
 1301 West Grand Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised March 25, 1999

OIL CONSERVATION DIVISION  
 2040 South Pacheco  
 Santa Fe, NM 87505

WELL API NO.  
 30-015-32329

5. Indicate Type of Lease  
 STATE  FEE

State Oil & Gas Lease No.  
 NA

6. Lease Name or Unit Agreement Name:  
 Kodiak State

Well No.  
 1

Pool name or Wildcat Sand Tank (Morrow)

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3546' GL 3563' KB

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 PROPOSALS.)

1. Type of Well:  
 Oil Well  Gas Well  Other

2. Name of Operator  
 Nadel and Gussman Permian, L.L.C. ✓

3. Address of Operator  
 601 N Marienfeld, Suite 508, Midland, Texas 79701

4. Well Location  
 Unit Letter P ~~X~~: 660' feet from the South line and 660' feet from the East line  
 Section 36 Township 17-S Range 29-E NMPM Eddy County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3546' GL 3563' KB

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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 recompilation.

7/28/02. TD well at 11,574'.

7/30/02 Started running 5-1/2" production string.

7/31/02 Finished running production casing. Set casing at 11,573'. Cemented csg w\ 625 sx's of cmt. Estimated TOC 9500'. Plug down at 1325 PM on 7/31/02

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

SIGNATURE Kem E. McCready TITLE Operations Engineer DATE 8/05/02

Type or print name Kem E. McCready Telephone No. 915-682-4429

(This space for State use) ORIGINAL SIGNED BY TIM W. GUM  
 DISTRICT II SUPERVISOR  
 APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE AUG 12 2002

Conditions of approval, if any: