

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

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

Form C-103

Revised March 25, 1999

WELL API NO.
30-045-31355

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

Carnahan Com. No.

8. Well No.

1Y

9. Pool name or Wildcat

Basin Fruitland Coal

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

Holcomb Oil and Gas, Inc.

3. Address of Operator

P.O. Box 2058, Farmington, NM 87499

4. Well Location

Unit Letter **A** : _____ feet from the **1275 FNL** line and **1205 FEL** feet from the _____ lineSection **35**Township **30N** Range **12W**NMPM **San Juan** County

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

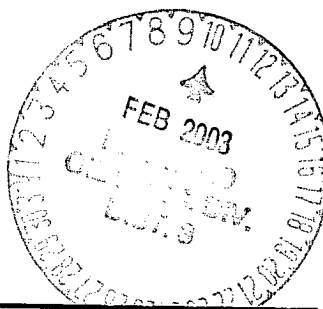
5879 GL

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

NOTICE OF INTENTION TO:PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐OTHER: ☐**SUBSEQUENT REPORT OF:**REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐CASING TEST AND CEMENT JOB ☐OTHER: ☐

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 recompletion.

**Holcomb Oil and Gas, Inc. intends to comence drilling of this well
 On Tuesday, February 18, 2003. A twenty-four hour notice of spud
 will be provided.**



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

SIGNATURE *W. J. Holcomb*TITLE **President**DATE **2/10/03**Type or print name **W. J. Holcomb**

(This space for State use)

Telephone No. **326-0550**APPROVED BY *Charlie Thum*TITLE **DEPUTY OIL & GAS INSPECTOR, DIST. #5**DATE **FEB 10 2003**

Conditions of approval, if any: