

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  
March 4, 2004

WELL API NO. <b>30-039-23332</b>	<i>Federal</i>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> BIA <input type="checkbox"/>	<i>Jicarilla</i>
6. State Oil & Gas Lease No. <b>JICARILLA 525</b>	
7. Lease Name or Unit Agreement Name <b>JICARILLA TRIBAL 525</b>	<i>34391</i>
8. Well Number <b>#1</b>	
9. OGRID Number <b>11859</b>	
10. Pool name or Wildcat <b>Basin Mancos</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>7189 GR</b>	

**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  
**Jicarilla Apache Energy Corporation**

3. Address of Operator  
**P.O. Box 710, Dulce, New Mexico 87528**

4. Well Location  
Unit Letter **I** : **1680** feet from the **South** line and **1020** feet from the **East** line  
Section **15** Township **31N** Range **2W** NMPM County **Rio Arriba**

**Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)**

Pit Location: UL **UL** Sect **UL** Twp **UL** Rng **UL** Pit type **UL** Depth to Groundwater **UL** Distance from nearest fresh water well **UL**  
Distance from nearest surface water **UL** Below-grade Tank Location UL **UL** Sect **UL** Twp **UL** Rng **UL** ;  
feet from the **UL** line and **UL** feet from the **UL** line

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <b>Test Oil &amp; Gas Production</b> <input checked="" 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. **This well is incorrectly listed as an CDX operated well in the OCD files. It is a JAECO operated well. 7/6/2004-Proposed to set test equipment on location and flow test the subject well to determine an estimated production rate. After flow test is completed the well will be evaluated for subsequent operations.**

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

SIGNATURE *Jesse Evans* TITLE **CEO/President** DATE **June 28, 2004**

Type or print name **JESSE D. EVANS** E-mail address: Telephone No.

(This space for State use)

APPROVED BY *Chad D.* TITLE **DEPUTY OIL & GAS INSPECTOR, DIST. #5** DATE **JUL - 6 2004**

Conditions of approval, if any: **45 per FT to have 2**

505-759-3119