Submit 3 Copies To Appropriate Distr Office:	State	of New Mexico	Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 8824		ls and Natural Resources	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 882	OIL CONCER	RVATION DIVISION	30-045-30716
District III	1220 Sou	th St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 8741 District IV	Santa l	Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			NMNM-99003
SUNDRY N (DO NOT USE THIS FORM FOR PR DIFFERENT RESERVOIR. USE "AI PROPOSALS.)		EPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name WF Federal 31
1. Type of Well: Oil Well Gas Well	○ Other		8. Well Number 1
2. Name of Operator Richardson Operating Comp	Dany Lance	O F 65 18 19 20 21 22 3	9. OGRID Number 010219 2299 38
3. Address of Operator 3100 La Plata Highway, Far	·	The sales	10. Pool name or Wildcat West Kutz PC & Basin FC
4. Well Location		101	
Unit LetterB_	:809feet from the	North line and	395feet from theEastline
Section 31		30N Range 14W	
	5360' (
Pit or Below-grade Tank Application	-		
Distance from nearest surface wate			Distance from nearest fresh water well No. 2 :
	ndfcet from the		,
12. Chec	k Appropriate Box to I	ndicate Nature of Notice	, Report or Other Data
NOTICE OF PERFORM REMEDIAL WORK	INTENTION TO:		BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	☐ PLUG AND ABANDOI	N 🔲 REMEDIAL WO	RK
	CHANGE PLANS		RILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST A	AND .
OTHER:	<u> </u>	OTHER: DHC F	<u> </u>
	l work). SEE RULE 1103.	For Multiple Completions: A	and give pertinent dates, including estimated date ttach wellbore diagram of proposed completion
This is based on information per		oi. 1 ictured Ciris 3.412707	Basin Futualid Coal 90.30076.
	DHC	1308AZ	
I hereby certify that the informatigrade tank has been/will be constructed	on above is true and completed or closed according to NMOCE	ete to the best of my knowled guidelines [], a general permit [ge and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan .
SIGNATURE Charles	4. Williams	_TITLE_ Engineering Oper	ations ManagerDATE_11/15/04
Type or print name Charles H	. Williams E-mail address	: cwilliams@richardsonoil.co	om Telephone No. 303.830.8000
(This space for State use)			
	1		NOV 16 2004
APPPROVED BY Conditions of approval, if any:	Am	DEPUTY O N 2 GAS INS	NOV 16 2004