Submit 3 Copies To Appropriate District Office				Form C-103	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	May 27, 2004 30-039-27721	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE	FEE	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87	7505	6. State Oil & G BIA # 11	as Lease No.	
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			7. Lease Name or Unit Agreement Name JICARILLA APACHE B		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number	20	
2. Name of Operator ELM RIDGE RESOURCES, INC.			9. OGRID Num	ber 149052	
3. Address of Operator P.O. BOX 156, BLOOMFIELD, NM 87413			10. Pool name o BALLARD Pl	r Wildcat ICTURED CLIFFS	
4. Well Location					
Unit Letter A : 1085 feet from the NORTH line and 935 feet from the EAST line					
Section 19 Township 24N Range 5W NMPM County RIO ARRIBA 11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
6,505° GL					
Pit or Below-grade Tank Application X or Closure					
Pit type Reserve Depth to Groundwater ~240' Distance from nearest fresh water well ~1280' Distance from nearest surface water ~170'					
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF IN	SEQUENT RE	PORT OF: ALTERING CASING □			
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON ☐ CHANGE PLANS ☐	REMEDIAL WOR		PANDA	
PULL OR ALTER CASING					
OTHER: RESERVE PIT	$oxed{X}$	OTHER:		П	
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.					
or recompletion.					
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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 Craig M.	Fiehler TITLE	Biologist		DATE 12/30/04	
Type or print name Craig M. For State Use Only	Fiehler E-mail ac	ldress: raig@permits	swest, com	elephone No. 505-466-8120	
10	18 Trout	UTY OIL & GAS INSI	DECTAD ALSO	DYAN - 4 2004	
APPROVED BY: Conditions of Approval (if any):	TITLE_	a ora (149)	reion, moi vas	DAIB 4 &UU &	