

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

Form C-103  
May 27, 2004

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

WELL API NO. <b>30-045-32701</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Ashcroft Travis</b>
8. Well Number <b>#1</b>
9. OGRID Number <b>010605</b>
10. Pool name or Wildcat <b>Basin Fruitland Coal</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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator <b>Holcomb Oil and Gas, Inc.</b>	
3. Address of Operator <b>P. O. Box 2058, Farmington, NM 87499-2058</b>	
4. Well Location Unit Letter <b>P</b> : <b>665</b> feet from the <b>South</b> line and <b>665</b> feet from the <b>East</b> line Section <b>23</b> Township <b>29N</b> Range <b>11W</b> NMPM County <b>San Juan</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>5439' ground level</b>	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. 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 COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☒

OTHER: ☐

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.

1/11/04, 1/12/05 - TD @ 1826' set 1794' 4½" 10.5# J-55 csg. Cement as follows:  
20 bbl gel spacer, 84 bbls (275 sks) lead cement @ 12.8#/gal 65/35/STD/  
POZ w/6% gel. 1% CC 5#/sk gilsonite, ½# Flocele. Tail cement 16 bbls  
(75 sks) STD cement @ 15.3# gal w/5# gilsonite, ½# Flocele. Bump plug  
w/1037 psi float held 4 bbls cement to surface.

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 W. J. Holcomb TITLE **President** DATE **1/17/05**  
Type or print name E-mail address: **Holcomb@digii.net** Telephone No. **(505)326-0550**

For State Use Only

APPROVED BY: Charles R. Acting TITLE **Acting SUPERVISOR DISTRICT # 3** DATE **JAN 18 2005**  
Conditions of Approval (if any):