

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-039-23182
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 Mother Lode
8. Well No. 1
9. Pool name or Wildcat Gavilan Mancos

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 type="checkbox"/> OTHER <input checked="" type="checkbox"/>	
2. Name of Operator Benson-Montin-Greer Drilling	
3. Address of Operator 4900 College Blvd, Farmington, NM 87402	
4. Well Location Unit Letter <u>H</u> : <u>1730</u> Feet From The <u>NORTH</u> Line and <u>860</u> Feet From The <u>EAST</u> Line Section <u>3</u> Township <u>24N</u> Range <u>2W</u> NMPM RIO ARRIBA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 7321' GL	

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
11. NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <u>Returned to Production</u> <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed work) SEE RULE 1103.

This well was returned back to production September 26, 2005



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

SIGNATURE Trudy Grubelnik TITLE Production Clerk DATE 09/26/05
TYPE OR PRINT NAME Trudy Grubelnik TELEPHONE NO. 505-324-5071

(This space for State Use)

APPROVED BY Chal TITLE SUPERVISOR DISTRICT # 3 DATE SEP 27 2005
CONDITIONS OF APPROVAL, IF ANY: