Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District 1 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	June 19, 2008 WELL API NO.
District II	OIL CONCEDUATION DIVISION	30-045-27493
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Salita PC, IVIVI 87303	6. State Oil & Gas Lease No. B-10894
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Jack Bingham
	Gas Well Other	8. Well Number 1
2. Name of Operator Elm Ridge Exploration LLC Co		9. OGRID Number 149052
3. Address of Operator		10. Pool name or Wildcat
Po Box 156, Bloomfield NM 8741.	3	Bisti Lower Gallup
4. Well Location		
Unit Letter_O:_440feet from the _South line and _1740feet from theEastline		
Section 32 Township 25N Range 11W NMPM San Juan County		
:	11. Elevation (Show whether DR, RKB, RT, GR, etc. 6430' GLE	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE	_	_
OTHER:	OTUED: Deturn 3	Fo Production ⊠
	eted operations. (Clearly state all pertinent details, an	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
FIG. Bit a Fig. 1 and in COLUCT and a state of a small state of the state of COLUCT and State of Column 1991.		
Elm Ridge Exploration CO LLC has returned the above well back to production as of 2-17-15.		
RECEIVED \		
FEB 26 2015		
		\ MMOCD /
		DISTRICT III
Spud Date: 12-26-89	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE TITLE: Sr. Regulatory Supervisor DATE: 2-17-15		
Type or print nameAmy Archuleta E-mail address:aarchuleta@elmridge.net PHONE: 505-632-3476 ext 201		
For State Use Only	ACCEPTED FOR RI	ECORD
APPROVED BY:	TITLETITLE	DATE
Conditions of Approval (if any):		

