Submit 3 Copies To Appropriate District Office State of New Mex		Form C-103		
District 1 Energy, Minerals and Natura 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		May 27, 2004 WELL API NO.	
District II OIL CONSERVATION I	DIVISION	30-039-26244		
District III 1220 South St. Franc		5. Indicate Type of	_	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE 6. State Oil & Gas I	FEE	
1220 S. St. Francis Dr., Santa Fe, NM 87505		o. saic on a das	20000 110.	
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name		
(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		Jicarilla 464		
PROPOSALS.)		8. Well Number	rilla 464	
1. Type of Well: Oil Well Gas Well Other:		No. 7		
2. Name of Operator Black Hills Gas Resources, Inc.		9. OGRID Number 013925		
3. Address of Operator		10. Pool name or Wildcat		
P.O. Box 249 Bloomfield, NM 87413		Cabresto Canyon, Tertiary		
4. Well Location				
Unit Letter: D : 1177 feet from the North line and 1116 feet from the West line				
Section: 29 Township 30N Range 3W NMPM County: Rio Arriba 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
Pit or Below-grade Tank Application or Closure				
Pit type: Work-over Pit Depth to Groundwater > 100 Distance from nearest fresh water well > 1000 Distance from nearest surface water > 200				
Pit Liner Thickness: 15 mil Below-Grade Tank: Volumebbls; Construction Material				
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			LTERING CASING	
	COMMENCE DRILLING OPNS. ☐ P AND A ☐ CASING/CEMENT JOB ☐			
_	0/10/10/0E/ME/11			
	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.				
710 10 20				
10 11 10 10 10 10 10 10 10 10 10 10 10 1				
Work over Pit Registration				
The state of the s				
	, FC,	Oio	\$/ Y	
25 to 7 Miles				
Therefore consider that the information above in the second state of the second state				
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 Muriel Many S TITLE: Regulatory Technician DATE 7/17/2006				
Type or print name: Daniel R. Manus E-mail address: dmanus@bhep.com Telephone No. (505) 634-1111 ext. 28				
For State Use Only				
APPROVED BY: Brandon Date DATE DATE				
Conditions of Approval (if any):				