

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. 30-039-26866
5. Indicate Type of Lease STATE ☐ FEE ☐
6. State Oil & Gas 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 PROPOSALS.)

1. Type of Well: ☐ Oil Well ☒ Gas Well ☐ Other:

2. Name of Operator
Black Hills Gas Resources, Inc.

3. Address of Operator
P.O. Box 249 Bloomfield, NM 87413

4. Well Location

Unit Letter: **D** : **2,045** feet from the **North** line and **860** feet from the **East** line

Section: **01** Township **29N** Range **3W** NMPM County: **Rio Arriba**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
7,321'

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 **> 100**

Pit Liner Thickness: **15** 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: **Pit Registration** ☒

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.

Pit Registration

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 *Daniel R. Manus* TITLE: Regulatory Technician DATE 12/6/2006

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 Powell* TITLE: DEPUTY OIL & GAS INSPECTOR, DIST. 7 DATE DEC 08 2006
Conditions of Approval (if any):