Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DIGITAL CT. I				ACVI.		
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240				WELL API NO. 30-031-21091		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 2040 Pacheco St. Santa Fe, NM 87505			5. Indicate Type of 1	Lease		
DISTRICT III			6. State Oil & Gas I	STATE X	FEE	
1000 Rio Brazos Rd., Aztec, NM 87410			1	2322	w	
SUNDRY NOTICI						
(DO NOT USE THIS FORM FOR PORPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)			7. Lease Name or U	nit Agreement Na	me	
1. Type of Well:			STATE 20-6-16			
OIL GAS WELL X	OTHER					
2. Name of Operator	OHER		8. Well No.			
SG INTERESTS I LTD, c/o Nik	2.					
3. Address of Operator	9. Pool name or Wildcat					
PO BOX 2677, DURANGO, CO 81302 (970) 259-2701			Fruitland Coal (71629)			
4. Well Location						
Unit Letter C : 6	60 Feet From The NORTH	Line and	1980 F	eet From The	WEST Line	
Section 16 T	ownship 20N Range 6W		NMPM		McKinley County	
	10. Elevation (Show wheth	her DF, RKB, RT, GI	R, etc.)			
	6843'	GR				
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
II. NOTICE OF IN	ITENTION TO:		SUBSEQUENT	REPORT O	F:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	<	ALTERING CASI	NG 🔲	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LLING OPNS.	PLUG AND ABAR	NDONMENT	
PULL OR ALTER CASING		CASING TEST AN	ID CEMENT JOB			
OTHER:		OTHER: 1st Deli	ivery		X	
	s (Clearly state all pertinent details, and give pe	rtinent date, including esti	mated date of starting any pro	oposed		
work) SEE RULE 1103.				RCVD AP	กวรเกร	
(1st Delivery - 3/27/07)				OIT COM		
CP 0#				DIS	T Q	
38 BWPD				013	1.0	
	mount of gas being generated	d is used on leas	se to run the pum	ojack.		
			,			
`						
I hereby certify that the information ab	ove is true and complete to the best of my	knowledge and helief				
SIGNATURE M a Scient	A Complete to the best of my	=	nt for SG Interests	DATE	04/19/07	
	cia Stewart	<u></u>				
TYPE OR PRINT NAME Man	oia Sigwaii		Ti	ELEPHONE NO.	(970) 259-2701	
(This space for State Use)						
APPROVED BY ACCEPT	ted for Record	TITLE		DATE		