Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office DISTRICT I	Energy, Minerals and Natural Resource	ces	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240	OIL CONSERVATION DIVISIO	ON:	WELL API NO.
DISTRICT II	1220 South St Prancis D		30-045-11081
1301 W. Grand Ave., Artesia, MM 87210	Santa Fe, NM(287505 🛸		5. Indicate Type of Lease
DISTRICT III	SEP 20	00 <b>3</b> 🥳	STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410	Programme Control	)	
DISTRICT IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	E OF COM	3. DIV.	State Oil & Gas Lease No.  024048
	S AND REPORTS ON WELLS	<del>, 3</del>	
	POSALS TO DRILL OR TO DEEPEN OR PLUG	BACK TÔ	
	PPLICATION FOR PERMIT" (FORM CART) FO	~ 6 1 57	7. Lease Name or Unit Agreement Name
PROPOSALS.)	4204.	المناه	
1. Type of Well:			LANDAUER
OIL GAS	1		
WELL WELL X	OTHER		
2. Name of Operator			8. Well No.
CORDILLERA ENERGY, INC. (505) 632-8056)			1
3. Address of Operator	INOTON NEW MEYIOO 07404		9. Pool name or Wildcat
	IINGTON, NEW MEXICO 87401		BASIN DAKOTA
4. Well Location Unit Letter H: 1430	Feet From The NORTH Line and	1120	Feet From The EAST Line
One Editor 11 . 1400	Total file Horal Ellicand	1120	restriction the <u>LAST</u> Enio
Section 3	Township 31N Range	13W	NMPM SAN JUAN
	10. Elevat (Show whether DR 5836' GR	R, RKB, RT,	GR, etc.)
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTI	I	ŕ	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL	L WORK ALTERING CASING
TV	i Fl		
TEMPORARILY ABANDON	CHANGE PLANS		
PULL OR ALTER CASING	MULTIPLE	CASING TE	EST & CEMENT JOB
OTHER:	COMPLETION	OTHER:	
OTHER.			
12. 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.			
It is out intention to Temporarily Abandon this well, pending recompletion to Menefee. This work should be completed within the next year. We are currently in the process of changing ownership/operator.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE PRODUCTION TECHNICIAN DATE 08-Sep-03			
TYPE OR PRINT NAME KAY S. ECKS	ΓΕΙΝ		TELEPHONE NO. (505) 632-8056
(This space for State Use)	1	DEPUTY O	ON & GAS INSPECTOD DIES SEP 10 200
APPROVED BY Charle TY	TITLE	- o n /6	DIL & GAS INSPECTOR, DIST. $\mathcal{S}^{EP} \stackrel{SEP}{\longrightarrow} 0$ 2003

CONDITIONS OF APPROVAL, IF ANY: