

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
**2040 Pacheco St.**  
**Santa Fe, NM 87505**

WELL API NO.  
30-039-26645

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

E-1207-8

**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

Elm Ridge Exploration Co LLC

3. Address of Operator

PO Box 156 Bloomfield, NM 87413

4. Well Location

Unit Letter N . 920 Feet From The South Line and 1735 Feet From The West Line

Section 16 Township 23N Range 6W NMPM Rio Arriba County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

6880 GR

**Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

11. **NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: First Delivery notice.

☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed work) SEE RULE 1103

First delivery information for the above well is as follows on November 2, 2001: Tubing pressure at 400 PSI, Casing pressure at 450 PSI, 145 MCF, 23 BBLS of oil, Tank # 31485, Western Refinery.

(Revised copy, Original sent 9-3-09.)

RCVD OCT 1 '09

OIL CONS. DIV.

DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Sharla Duggins

TITLE

Production Technician

DATE

09/30/09

TYPE OR PRINT NAME

Sharla Duggins

TELEPHONE NO

505-632-3476 ext. 201

(This space for State Use)

APPROVED BY

accepted for record only

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY.

B