

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
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
Revised May 08, 2003

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-031-21057
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Alto Landing SF 34
8. Well Number 001
9. OGRID Number 162683
10. Pool name or Wildcat Menefee Gas
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6635' GR

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other
2. Name of Operator Gruy Petroleum Management Co.
3. Address of Operator P.O. Box 140907 Irving, Texas 75014-0907
4. Well Location Unit Letter <u>G</u> : <u>1793</u> feet from the <u>North</u> line and <u>1863</u> feet from the <u>East</u> line Section <u>34</u> Township <u>20N</u> Range <u>07W</u> NMPM County <u>McKinley</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6635' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>	

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.

01-18-04 Spudded well.
01-22-04 Ran 9.625 36# H-40 casing to 355.' Cemented with 168 sx Type 3 cement. Circulated 14 bbls cement to pit. WOC 33 hours.



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

SIGNATURE Natalie Krueger TITLE Production Assistant DATE 02-12-04

Type or print name Natalie Krueger Telephone No. 972-401-3111

(This space for State use)

APPROVED BY Charles H. [Signature] DEPUTY OIL & GAS INSPECTOR, DIST. IV DATE FEB 17 2004
Conditions of approval, if any: