

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

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

WELL API NO.

30-045-25274

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

L-2986

7. Lease Name or Unit Agreement Name

State of New Mexico 36

8. Well Number

24

9. OGRID Number

149052

10. Pool name or Wildcat

24141 Lybrook Gallup

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 LLC co

3. Address of Operator

Po Box 156, Bloomfield NM 87413

4. Well Location

Unit Letter N : 800 feet from the South line and 1850 feet from the West line

Section 36 Township 24N Range 8W NMPM County San Juan

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

GR 6800'

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 ☐  
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

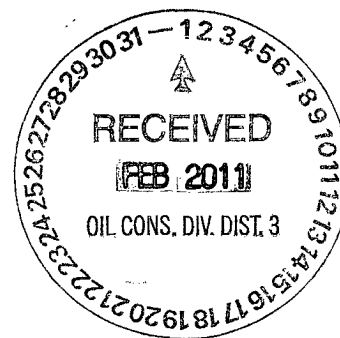
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: Return to Production ☒

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

The above well has returned to production as of January 26, 2011.



Spud Date:

1-09-82

Rig Release Date:

1-26-11

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

SIGNATURE Sharla Bemrose TITLE: Administrator Specialist DATE 1-27-11

Type or print name Sharla Bemrose E-mail address: amackey1@elmridge.net PHONE: 505-632-3476 ext 201

**For State Use Only**

APPROVED BY: ACCEPTED FOR RECORD

TITLE

DATE

Conditions of Approval (if any):

h