Submit 3 Copies to Appropriate District Office

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
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-031-20421

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No. (Fee)

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)

7. Lease Name or Unit Agreement Name: Santa Fe Pacific Railroad

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Injection Well

2. Name of Operator: Robert L. Bayless

8. Well No. 15

3. Address of Operator: PO Box 168, Farmington, NM 87499

9. Pool name or Wildcat: Miguel Creek Gallup

4. Well Location
Unit Letter F : 2405 Feet From The North Line and 2805 Feet From The East Line
Section 29 Township 16N Range 6W NMPM McKinley County

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

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: Change of Operator ☒	

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.

Change Operator from Baca Petroleum Corp., 1801 Broadway, Suite 1540, Denver, CO 80202, to Robert L. Bayless

RECEIVED
JAN 13 1992
OIL CON. DIV.
DIST. 3

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

SIGNATURE [signature] TITLE Operator DATE Jan. 10, 1992

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY [signature] TITLE SUPERVISOR DISTRICT # 3 DATE JAN 17 1992

CONDITIONS OF APPROVAL, IF ANY: