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 DISTRICTI

P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO. 30-039-24882 5. Indicate Type of Lease STATELX FEE

6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aziec, NM 87410 E - 6833SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) State 32 Type of Well: WELL OTHER WFI I. 8. Well No. 2. Name of Operator Bannon Energy, c/o Daggett & Chenault, Inc. 9. Pool name or Wildcat 3. Address of Operator Lybrook/Gallup Ext 3539 E. 30th, Sute 7B, Farmington, NM 87401 Well Location 598 Feet From The Line and ___ Unit Letter H: 2234 Feet From The North County NMPM Rio Arriba Range Township 24N Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 7417 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. CHANGE PLANS TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING

EXTEND Permit to Drill 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.

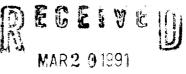
X

OTHER:

Well to be drilled to penetrate the Gallup Formation. All producing intervals in the Gallup will be stimulated as necessary.

(This is for extension only, original Application for Permit to Drill is on file).

APPROVAL EXPIRES_ UNLESS DRILLING IS COMMENCED. SPUD NOTICE MUST BE SUBMITTED WITHIN 10 DAYS



OIL CON. DIV.

WITHIN 10 DAYS.	DIST. 3	
I hereby certify that the inflarmation above if true and complete to the best of my know	iedge md belief.	DATE 3-19-91 TELEPHONE NO. 326-1772
TYPE OR PRINT NAME Robert S. Larson		
(This space for State Use) Original Signed by FRANK T. CHAVEZ	SUPERVISOR DISTRICT # 3	MAR 2 0 1991