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 Office	-	•		Reviseu	1-1-89	
DISTRICT I	DIL CONSERVATI			· · · · · · · · · · · · · · · · · · ·		
P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St.			WELL API NO. 30 - 025 - 29319			
DISTRICT II P.C. Drawer DD, Artesia, NM 88210	Santa Fe, NM 87505			5. Indicate Type of Lease		
DISTRICT III			STATE FEE X			
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.			
SUNDRY NOTICES AND REPORTS ON WELLS						
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name R.F. FORT "A"			
						1. Type of Well: OIL GAS G
OIL GAS WELL	OTHER					
2. Name of Operator			8. Well No.	-		
TRIUMPH EXPLORATION 3. Address of Operator			1			
P. O. BOX 10280, MIDLAND, TEXAS 79702			9. Pool name or Wildcat KNOWLES WOLFCAMP			
4. Well Location	HODTU		· · · · · · · · · · · · · · · · · · ·			
Unit LetterF_: 2310	Feet From The NORTH	Line and 23	10 Feet Fron	n The WEST	Line	
Section 24	Township 175 R	lange 38 E	17.60	LEA	ļ	
	10. Elevation (Show whet		<u>NMPM</u> :.)	VIIIIIIIII	County	
	<u>////\\</u>					
11. Check App	ropriate Box to Indica					
NOTICE OF INTE	NTION TO:	SUB	SEQUENT F	REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERNO CARNO		
	Ä			ALTERING CASING		
PULL OR ALTER CASING CHANGE PLANS COMMENCE DRILL CASING TEST AND			GOPNS. \square	PLUG AND ABANDO	NMENT 🔟	
			EMENT JOB			
OTHER:		OTHER:	······································			
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	ations(Clearly state all pertinent d	letails, and give pertinent	dates, including es	stimated date of starti	ng any propo	
9-5-01 C.I.B.P. @ 9500' 25 9-7-01 SPOT 35 SKS 6500-640 9-10-01 CUT 7" @ 5059 PULL 9-11-01 SPOT 75 SKS @ 5100 SPOT 35 SKS 2265-21 SPOT 35 SKS @ 450 T 9-12-01 SPOT 20 SKS TO SURF	00 PIPE TAG @ 4700' L65 TAG @ 315					
CIRC 9.5 MUD INSTALL P & A MARKER		THE COMMISSION / HOURS PRIOR TO PLUGGING OPERATOR APPROVED.	THE BEGINNIN	NG OF		
I hereby certify that the information above is true	and complete to the best of my knowl	ledge and belief.				
SIGNATURE Kandall	Lost			DATE 10/17/	2001	
TYPE OR PRINT NAME DANDARY DOCUMENT						
TYPE OR PRINT NAME RANDALL FOSTE	<u>K</u>			TELEPHONE NO. 915/	00/-4220	
(This space for State Use)			_			
APPROVED BY	ale to	IE flake			1-03	