Submit 3 Copies To Appropriate District Office	Butto of frew Mexico		Form C-103	
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	May 27, 2004
District II			30-003-20025 5. Indicate Type of Lease	_
District IV Santa Fe, NM 87505			STATE x FEE	
District IV Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505	วกก5		164557	
SI NI DIVINOTICI	EC AND REPORTS ON WELLS	LIC DACK TO A	7. Lease Name or Unit Agree	ement Name
DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT," (FORM C-101) FOR SUCH			Wildcat	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRIVE 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 x Other			8. Well Number	
3;	as well A Other		North State 1-16	
Name of Operator Ridgeway AZ. Oil Corp			9. OGRID Number 164557	
3. Address of Operator			10. Pool name or Wildcat	
P.O. Box 1110, St. Johns, AZ. 85936			Wildcat	
4. Well Location		1' 1 660		11
Section 16	feet from theS Township In		feet from the _E NMPM Catron	line County
	11. Elevation (Show whether DR			County
	6892 GR		27.55 Sub-2704	A Part Control
Pit or Below-grade Tank Application or C				
Pit typeDepth to Groundwates Pit Liner Thickness: mil	rDistance from nearest fresh v Below-Grade Tank: Volume		ance from nearest surface water nstruction Material	
				<u> </u>
12. Check Ap	propriate Box to Indicate N	adure of Notice,	Report of Other Data	
NOTICE OF INTI			SEQUENT REPORT OF	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORL TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				CASING 🗌
 -	MULTIPLE COMPL	CASING/CEMENT		
OTHER:	X	OTHER:		П
13. Describe proposed or complet	ed operations. (Clearly state all	pertinent details, and		
of starting any proposed work or recompletion.). SEE RULE 1103. For Multip	le Completions: Att	ach wellbore diagram of propo	sed completion
Request Temporary Abandonment state	us, well has been PolyBored, and	I filled with fresh wa	ter, 0 pressure on casing 7/19/0)5 test
witnessed by Roy Johnson, District Sup	pervisor, NMOCD			1
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			of STATUS	
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		í-	A. STATUS WEXPIRE ON	
		1-	8/7/00	
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I hereby certify that the information ab- grade tank has been/will be constructed or clo	ove is true and complete to the b sed according to NMOCD guidelines [est of my knowledge □, a general permit □	e and belief. I further certify that or an (attached) alternative OCD-ap	any pit or below- proved plan □.
SIGNATURE C	TITLE (Derations	Mgs DATE &	1/05
Type or print name		Idrass		
Type or print name For State Use Only	E-mail ac		Telephone No	
	11 - Li	DISTRICT SII	PERVISOR DATE 8	2/1
APPROVED BY: Conditions of Approval (if any):	/astro TITLE		DATE O	11/02