| Office | State of No | ew Mexico | | Form C-103 |
|--|---|--|---|---|
| Office District I | Energy, Minerals an | d Natural Resources | · · · · · · · · · · · · · · · · · · · | March 4, 2004 |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | - 37/199 |
| District II | OIL CONSERVA | TION DIVISION | 30-01 | 5-33477 |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | 1220 South S | | 5. Indicate Type | of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | STATE | ☐ FEE ☒ |
| District IV | Santa Fe, I | NIVI 8/3U3 | 6. State Oil & G | as Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | • | | | |
| | ES AND REPORTS ON V | WELLS | 7. Lease Name of | or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSAL | | | HAIN | |
| DIFFERENT RESERVOIR. USE "APPLICAT | 'ION FOR PERMIT" (FORM C- | 101) FOR SUCH | | |
| PROPOSALS.) 1. Type of Well: | | 101) FOR SUCH 101) FOR SUCH 10 | 8. Well Number | |
| Oil Well Gas Well | Other | (a) A 6 | 1 | 1 |
| | | /&i | 8) | |
| 2. Name of Operator | N. O. T. O. G. L. G. D. C. | 6 JUL 2004 | OGRID Numl | |
| MURCHISO | | RECEIVED | $\begin{vmatrix} \vec{n} \\ \vec{n} \end{vmatrix}$ | 15363 |
| 3. Address of Operator | | M ARTESIA | No. Pool name o | |
| 1100 MIRA VISTA | BLVD., PLANO, TX. | \75093-4698 | ₩ILD | CAT |
| 4. Well Location | | (s) 15th | ·/ | |
| | | NOPTH 65 57 1797 500 | | |
| Unit Letter F :: | 1980 feet from the | NORTH line and | 1980 feet fr | om the <u>WEST</u> line |
| | 177 / | | | |
| Section 19 | | Range 27-E | NMPM | County EDDY |
| | • | her DR, RKB, RT, GR, etc | .) | |
| P4 P I - 1 T - 1 A - P - 4 (F - 4 | 3302' | GL | | |
| Pit or Below-grade Tank Application (For pit | | | _ | |
| Pit Location: ULSectTwp | | | - | earest fresh water well |
| Distance from nearest surface water | Below-grade Tank Location | n ULSectTwp | Rng; | |
| feet from theline and | feet from theli | ne | | |
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| 12. Check Ap | | cate Nature of Notice, | | |
| 12. Check Ap | ENTION TO: | SUB | SEQUENT RE | |
| 12. Check Ap | ENTION TO: | SUB | SEQUENT RE | |
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