

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. <u>30-615-00665</u>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>Aspen Oil, Inc.</u>		6. State Oil & Gas Lease No. <u>B-8318</u>
3. Address of Operator <u>P.O. Box 2674 Hobbs NM 88241</u>		7. Lease Name or Unit Agreement Name <u>Acree State 34</u>
4. Well Location Unit Letter <u>F</u> : <u>2260</u> feet from the <u>North</u> line and <u>1650</u> feet from the <u>West</u> line Section <u>36</u> Township <u>17S</u> Range <u>27E</u> NMPM County <u>Eddy</u>		8. Well Number <u>34</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>GL 3603</u>		9. OGRID Number <u>10701</u>
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat <u>Empire Yates Seven River</u>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Rig up unit clean hole to new TD @ approx. 520'
RU wireline set CIBP @ 450' RIH w/ 450' 4 1/2"
casing tag CIBP pull up 1ft cement to surface
Drillout CIBP + cement to T.D. clean hole, Run
tubing + Rods, return well to production.
Work will start after Dec. 16th
16th

Please use updated Form C-103

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Larry Bancroft TITLE President DATE 12-13-04

Type or print name TIM W. GUM E-mail address: _____ Telephone No. 505-393 2277

For State Use Only
APPROVED BY TIM W. GUM DISTRICT II SUPERVISOR
Conditions of Approval (if any)

DATE DEC 20 2004

If this work requires an earthen pit, a permit must be approved prior to construction of the pit(s)

Oper. To use pressure control device