Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	<b></b>		ELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210			30 - 015 - 33779 Indicate Type of Lease
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		is Dr.	STATE FEE _
District IV 1220 S. St. Francis Dr., Santa Fe, NM Santa Fe, NM Santa Fe, NM		03 6.	State Oil & Gas Lease No.
87505			Logge Name on Unit Agreement Name
(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.)			Lease Name or Unit Agreement Name OKER LAKE UNIT
1. Type of Well: Oil Well			Well Number 188Y
2. Name of Operator		9.	OGRID Number 001801
3. Address of Operator P. O. Box 2760 Midland, TX 79702		ALIENA 10.	Pool name or Wildcat ASH DRAW - DELAWARE
4. Well Location			
Unit Letter C: 695 feet from the NORTH line and 1880 feet from the WEST line			
Section 5 Township 24S Range 30E NMPM CountyEDDY			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3256' GR  Pit or Below-grade Tank Application  or Closure  \(\overline{\text{S}}\)			
Pit type DRILLING Depth to Groundwater >100' Distance from nearest fresh water well >200' Distance from nearest surface water >1000'			
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume 7300 bbls; Construction Material SYNTHETIC			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING			
TEMPORARILY ABANDON			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JO	в 🗆
OTHER:PIT CLOSURE	X	OTHER:	
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.  Pit will be closed per guidelines: Section IV-B-3-a.			
rit win de closed per guidelines. S	zuon 1 v - D - 3 - a.		
		NI-418 COM A	
		Notify OCD 24	hrs. prior to any work done
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 NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE (ind	TITLEProd	uction Clerk	DATE 01/20/2005
Type or print name Cindi Goodman For State Use Only	E-mail add	ress:cdgoodman@bass	pet.com Telephone No. (432)683-2277
ADDDOVED DV.		1-01 D	D
APPROVED BY: Conditions of Approval (if any):	TITLE	THE PARTY OF	A CANVIE O SOUD