Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103		
Pintrict !	Energy, Minerals and Natural Resources			Revised May 08, 2003 WELL API NO.		
625 N. French Dr., Hobbs, NM 88240 histrict II				30-015-00674		
301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION				5. Indicate Type of Lease		
District III 1220 South St. Francis Dr. 000 Rio Brezos Rd., Azzoc, NM 87410				STATE FEE		
isariet IV Salita Fe, NM 8/303 120 S. St. Francis Dr., Senta Fe, NM				6. State Oil & Gas Lease No.		
SUNDRY NOT	CES AND REPORTS	ON WELLS		7. Lease Name	or Unit Agreement	Name
DO NOT USE THIS FORM FOR PROPOS	SALS TO DRILL OR TO DE	EPEN OR PLU	G BACK TO A			
MFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH "ROPOSALS.)				RAMAPO		
. Type of Weil:				8. Well Number		
Oil Well 🛛 Gas Well 🗆] Other			#2		
. Name of Operator				9. OGRID Nu	mber	
ROJO GRANDE LLC				182162		
. Address of Operator				10. Pool name or Wildcat		
O. BOX 248, ARTESIA, NM 8	8210			EMPIRE YATES SR		
l. Well Location						
1 In 14 Y	. 2210	4. COI		1 2210 6-4	from the MITCOT	line
Unit LetterK_	:_2310Bet from	пе2(у	JIT IINE ALLC	2310198	t from the _WEST	
Section 36	Township 17S	Range	27£	NMPM	County EDDY	, l
, , , , , , , , , , , , , , , , , , ,	11. Elevation (Show	whether DR.	RKB. RT. GR. el			
	3620°					
12. Check A	Appropriate Box to	Indicate N	ature of Notice	, Report or Oth	er Data	
NOTICE OF IN				BSEQUENT R		
PERFORM REMEDIAL WORK		ON 🔯	REMEDIAL WO		ALTERING CASI	NG 🗆
_		_	[_	_	
TEMPORARILY ABANDON 🔃	CHANGE PLANS		COMMENCE DI	RILLING OPNS.		
PULL OR ALTER CASING	MULTIPLE		CASING TEST	AND [_ ABANDONMENT	
PULL OR ALTER CASING	COMPLETION	u	CEMENT JOB	- Neuro	_	1
			02			\
OTHER:			OTHER:			
 Describe proposed or comp of starting any proposed w or recompletion. 	leted operations. (Clear ork). SEE RULE 1103	erly state all p For Multip	pertinent details, and le Completions:	nd give pertinent Attach wellbore di	dates, including estim agram of proposed co	ated date empletion
/E PLAN TO P&A AS FOLLOW	5: Not	dfy OCD 2	24 hrs. prior to	any work do		
		•	p	dity work do	isc.	
1. Total depth of 480°		TC		1	C C	
2. Fluid level @ 469'.	If casi	mg does no	t take 65 cu	att. of		
3. Fill csg to surf w/ 80 cuft o	cemer	nt initially.	Operator w	ill he		
4. Install dry hole marker.			•	-		
		requir	eu to arm o	out to 480'	ana	
	cemer	nt well agai	n.			
ereby certify that the information	above is true and com	plete to the b	est of my knowle	dge and belief.		
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ignature GOOM C	ocknin	TITLE	Agent	DATE6/1	/03	
ton a print name						
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This space for State use)		A	~//] /	/		
PPPROVED BY	•	The same of the sa	はの き	A) E	IIIN	102
onditions of approval, if any:				Y -	DATE OIT	V
4.				1		