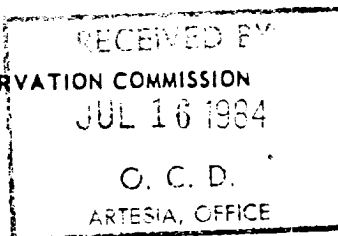


| | |
|------------------------|-------------------------------------|
| NO. OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | <input checked="" type="checkbox"/> |
| FILE | <input checked="" type="checkbox"/> |
| U.S.G.S. | <input type="checkbox"/> |
| LAND OFFICE | <input type="checkbox"/> |
| OPERATOR | <input checked="" type="checkbox"/> |

NEW MEXICO OIL CONSERVATION COMMISSION



Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

| | |
|--------------------------------|---|
| 5a. Indicate Type of Lease | |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No. | |

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.)

| | |
|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 7. Unit Agreement Name |
| 2. Name of Operator Cibola Energy Corporation | 8. Farm or Lease Name Plains 29 |
| 3. Address of Operator P. O. Box 1668, Albuquerque, New Mexico 87103 | 9. Well No. 7 |
| 4. Location of Well UNIT LETTER <u>E</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>10S</u> RANGE <u>28E</u> NMPM. | 10. Field and Pool, or Wildcat <u>Und.</u> Race Track SA |
| 15. Elevation (Show whether DF, RT, GR, etc.) <u>3735.4</u> <u>3735.4</u> | 12. County Chaves |

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

| | |
|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | |
|---|---|
| REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOB <input type="checkbox"/> | |
| OTHER <input type="checkbox"/> | |

17. 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.

7-12-84 Spudded well at 10:00 pm

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Karen Aspin TITLE Drilling Secretary DATE 7-13-84

APPROVED BY Original Signed By
Leslie A. Clements TITLE Supervisor District II DATE JUL 17 1984

CONDITIONS OF APPROVAL, IF ANY: