State of New Mexico Energy, Minerals and Natural Resources Department

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSEDVATION DIVISION

Form C-103 Revised 1-1-89

| <u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 | Box 1980, Hobbs, NM 88240 2040 Pacheco St. | | | WELL API NO. 30-015-00673 | |
|--|--|------------------------|-------------------------------------|------------------------------|--|
| DISTRICT II | Santa Fe, NM 87505 | | ₅Indicate Type of Leas | se | |
| P.O. Drawer DD, Artesia, NM 88210 | | | , | STATE X FEE | |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | | ₅State Oil & Gas Leas 1127412 | | |
| 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.) | | | rLease Name or Unit | | |
| Type of Well: OIL GAS WELL WELL | OTHER | | вWell No. | | |
| Name of Operator ROJO GRANDE LLC | | | 1 | | |
| Do. BOX 248, ARTESIA, NM 882 | 10 | | Pool name or Wildca EMPIRE YATES | S SEVEN RIVERS | |
| Well Location Unit Letter K : 1650 | Feet From The SOUTH | Line and2310 | Feet From The | WEST Line | |
| Section 36 | Township 17S | Range 27E | NMPM | EDDY County | |
| | 10 Elevation (Show whether | DF, RKB, RT, GR, etc.) | | | |
| Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | | | | | |
| NOTICE OF IN | | SUB | SEQUENT RE | EPORT OF: | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | | ALTERING CASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING | OPNS. | PLUG AND ANBANDONMENT | |
| PULL OR ALTER CASING | | CASING TEST AND CEN | MENT JOB | <u></u> | |
| OTHER: | | | | | |
| 12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. | | | | | |
| , | | | | | |
| 1/24/00 WELL WAS 510' DEEP, N | NO PIPE IN HOLE, NO FLUID I | N HOLE, FILLED TO SUF | RFACE W/READY I | MIX, INSTALLED DRY | |
| HOLE MARKER | | | * ** | | |
| | | , | 4. | Post Put | |
| | | /8 | | 1-24-28 | |
| | | 192 | RECEIVED | 1 | |
| | | / <u>#</u> 00 | D-ARTESIA | \$/ \$/ | |
| | | SI. | \s ⁵ / | / | |
| | | 61 | RECEIVED DD - ARTESIA | | |
| I hereby certify that the information above is | s true and complete to the best of my kr | nowledge and belief. | | | |
| | chun | TITLE AGENT | | DATE 01-25-00 | |
| TYPE OR PRINT NAME ROBIN COCKRU | JM | | | TELEPHONE NO. 746-9037 | |
| (This space for State Use) | | | | | |
| APPROVED BY MILES TREELY | لمار | TITLE Field Rep. II | | DATE 1/27/2030 | |