

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-015-01291

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
E-10068-4

7. Lease Name or Unit Agreement Name  
EAST RED LAKE UNIT TR 1

8. Well No.  
4

9. Pool name or Wildcat  
RED LAKE; QUEEN GB, EAST

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3613

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. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
RODNEY B. WEBB dba WEBB OIL COMPANY

3. Address of Operator  
PO BOX 1124, ARTESIA NM 88211-1124 (505)748-1121

4. Well Location  
Unit Letter K : 1980 Feet From The SOUTH Line and 1980 Feet From The WEST Line  
Section 36 Township 16S Range 28E NMPM EDDY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3613

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: RETURN TO PRODUCTION <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

LOCATIONS AND ROAD CLEARED  
WELL HEAD INSTALLED  
FLOW LINE LAID  
PANEL BOXES HUNG  
PUMPING UNITS SET  
RODS READY  
WAITING ON TUBING

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

SIGNATURE Susan Glass TITLE PRODUCTION CLERK DATE 05/15/98

TYPE OR PRINT NAME SUSAN GLASS TELEPHONE NO. 748-1121

(This space for State Use)

APPROVED BY Michele Stutts TITLE Field Rep. I DATE 12/14/2000

CONDITIONS OF APPROVAL, IF ANY: