

Submit 3 Copies To Appropriate District Office
District I
25 N. French Dr., Hobbs, NM 88240
District II
1 South First, Artesia, NM 88210
District III
100 Rio Brazos Rd., Aztec, NM 87410
District IV
40 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

15F
Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-01505022
Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
Name of Operator Joe Melton Drilling Co., Inc.		6. State Oil & Gas Lease No. OG-1306
Address of Operator P.O. Box 4203 Midland, Texas 79704		7. Lease Name or Unit Agreement Name: Western Development B State
Well Location Unit Letter <u>F</u> : 1980 feet from the <u>North</u> line and 1980 feet from the <u>West</u> line Section <u>36</u> Township <u>16S</u> Range <u>31E</u> NMPM <u>Lea</u> County		8. Well No. 1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4197		9. Pool name or Wildcat Grybg Jackson 7 Rvrs QN-BB SA

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"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
CULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

2. 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.

Electrical service ran to unit. Began pumping well on 11/25/00. Well making approximately 86 BW per day. We will continue pumping this well in order to see if it is capable of producing oil.

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

SIGNATURE Karen Allen TITLE Secretary DATE 12/12/00

TYPE OR PRINT NAME Karen Allen Telephone No. 915 682-5461
(This space for State use)

APPROVED BY [Signature] TITLE Field Rep. Fr DATE 12/20/2000
Conditions of approval, if any: