

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

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OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO.
 30-015-20586

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.
 B-1111-11

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
 Ricks Exploration, Inc

3. Address of Operator
 210 Park Ave, STE 3000 Oklahoma City, OK 73102

4. Well Location
 Unit Letter E : 1810 feet from the North line and 790 feet from the West line
 Section 28 Township 17 S Range 28 E NMPM Eddy County

7. Lease Name or Unit Agreement Name:
 State Federal Gas Com

8. Well No. 1

9. Pool name or Wildcat
 Empire Penn- Gas

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3641 RKB

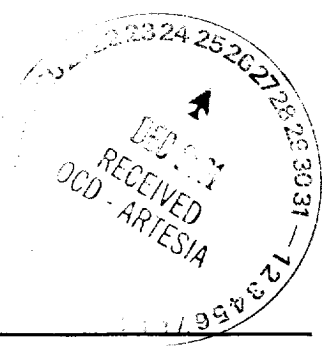
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Set CIBP @ 9950' +/- . Cap CIPB w/ ^{35'} 30' of cement. Load hole w/ inert fluid and test casing to 500# for 30 min. T&A well pending transfer to SDX Resources, Inc. for conversion to a disposal well.

Notify OCD 24 hrs. prior to any work done



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

SIGNATURE Bryan Rother TITLE Engineer DATE 12/19/01

Type or print name Bryan Rother Telephone No. 405/516/1100

(This space for State use)

APPROVED BY [Signature] TITLE Field Rep ID DATE 1-10-02

Conditions of approval, if any: