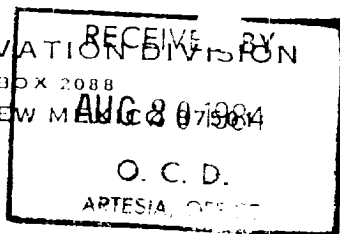


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87504



Form C-103
Revised 10-1-7

5a. Indicate Type of Lease
State ☒ Fee ☐
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- 2. Name of Operator J.E.M. Resources, Inc. 3. Address of Operator P.O. Box 2938, Ruidoso NM. 88345 4. Location of Well UNIT LETTER N 990 FEET FROM THE South LINE AND 1650 FEET FROM West 4 TOWNSHIP 17 S RANGE 29 E N.M.P.M. 15. Elevation (Show whether DF, RT, GR, etc.) 3585 Gr.	7. Unit Agreement Name 8. Farm or Lease Name Red Twelve State 9. Well No. 1 10. Field and Pool, or Wildcat Cave GB/SA 12. County Eddy
---	---

16. 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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

8/15/84 Spud 12 1/4 hole @ 3:45 PM

8/16/84 TD 340' Run 340' 8 5/8" 24# csng.
Cmt w/ 270 SXS Class "C" 2% CaCl₂ Plug down @ 4:15 AM Cir 10 SXS to pit
WOC 18 Hrs. Pressure test csng to 500# held 30 min no pressure
Drop.
Drilled out w/ 7 7/8" bit

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

SIGNED

TITLE Consulting Geologist

DATE 8/17/84

APPROVED BY Original Signed By
Leslie A. Clements

TITLE

DATE

AUG 24 1984

CONDITIONS OF APPROVAL, IF ANY: Supervisor District II