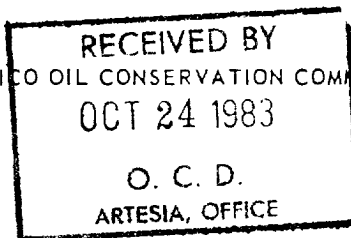


NO. OF COPIES RECEIVED	
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SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

NEW MEXICO OIL CONSERVATION COMMISSION



Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	E-9261

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 <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Santa Rita Exploration Corp. ✓	8. Farm or Lease Name Ohio State
3. Address of Operator P.O. Box 798, Artesia, New Mexico 88210	9. Well No. #1
4. Location of Well UNIT LETTER L 1650 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 18S RANGE 28E NMPM.	10. Field and Pool, or Wildcat Artesia Q GR SA
15. Elevation (Show whether DF, RT, GR, etc.) 3615'	12. County Eddy

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Perf & acid job

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.

PBTD @ 2857'

10/17/83 Perforated at 2163,64,65,66,69,2208,09,10,11,12,2223,24,25,27,39,40,43,44,78,79,80,2328,29,2330' Total - 24 shots.

Acidized w/2000 gals 15% NEFE.

10/18/83 Fraced w/40,000 gals 2% KCL gelled water & 41,000# 20/40 sand, 14,000# 10/20 sand.

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

SIGNED Leslie A. Clements TITLE Production Clerk DATE 10/21/83

Original Signed by  
Leslie A. Clements

APPROVED BY \_\_\_\_\_ TITLE Supervisor District II DATE OCT 25 1983

CONDITIONS OF APPROVAL, IF ANY: