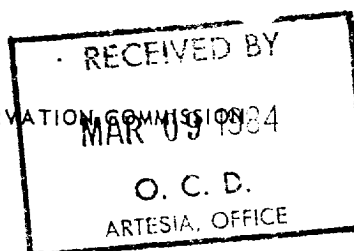


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LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

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 ☒ Fee ☐

5. State Oil & Gas Lease No.
OG-103

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

1. Name of Operator
Santa Rita Exploration Corp. ✓

2. Address of Operator
P.O. Box 798 Artesia, New Mexico 88210

3. Location of Well
UNIT LETTER A, 990' FEET FROM THE North LINE AND 430 FEET FROM
THE East LINE, SECTION 7 TOWNSHIP 18s RANGE 28e NMPM.

7. Unit Agreement Name

8. Farm or Lease Name
Sun State

9. Well No.
#1

10. Field and Pool, or Wildcat
Artesia Queen GR-SA

15. Elevation (Show whether DF, RT, GR, etc.)
3624

12. County
Eddy

6. 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 OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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.

Well was drilled to a total depth of 2502' at 1:00 pm on March 7, 1984.

3/7/84

Ran 2380' of 5½", 15.5# limited service casing.
Ran FDC CNL Gamma Ray Log.
Cemented with 250 sxs Halliburton Lite, 6# salt, ¼# flocele
and 300 sxs Class "C", 6# salt, .03% CFR-2

Circulated 40 sxs to surface.
Plug down at 7:30 am on 3/8/84
Pressure tested 1800# for 30 minutes - Held
WOC 96 hours.

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

SIGNED Vickie Sue TITLE Production Clerk DATE March 8, 1984

Original Signed By
Leslie A. Clements
Supervisor District H

APPROVED BY _____ TITLE _____ DATE MAR 09 1984

CONDITIONS OF APPROVAL, IF ANY: