

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

OIL CONSERVATION DIVISION

220 South St. Francis Dr.

Santa Fe, NM 87505

CIS *[Signature]* Form C-103  
Revised March 25, 1999

WELL API NO.	30-015-32410
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name:	State 'IE' Com.
8. Well No.	#2
9. Pool name or Wildcat	Happy Valley - Morrow Gas (78060)

**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  
110 W. Louisiana, Ste 410 Midland, TX 79701

4. Well Location  
Unit Letter M : 660' feet from the South line and 660' feet from the West line  
Section 16 Township 22S Range 26E NMPM County Eddy

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3447' GR

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

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.

10/26/02 Drilled 12-1/4" hole 2525'. RU & ran 9-5/8" #40, J55, ST&C casing and set @ 2525'. Cement csg w/ 200 sx Class "H" + additives and 700 sx 50/50 Poz "C" + additives. TW 200 sx Cl "C" + additives. Circ 266 sx to surface. WOC. NU BOP and test. Resume drlg.

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

SIGNATURE *[Signature]* TITLE Regulatory Analyst DATE 11/05/02  
Type or print name Kim Stewart Telephone No. 915/ 683-7443  
(This space for State use)

APPROVED BY For Record Only TITLE \_\_\_\_\_ DATE NOV 18 2002  
Conditions of approval, if any: