Submit 3 Copies 'To Appropriate District Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	State of Ne Energy, Minerals and OIL CONSERVA 1220 South St Santa Fe, N	I Natural Resources TION DIVISION t. Francis Dr. IM 87505	WELL API NO. 30-015-22182 5. Indicate Type o STATE 6. State Oil & Ga NM-0415688-A	FEE 🔀	
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 Water injection well			Old Indian Draw U	7. Lease Name or Unit Agreement Name: Old Indian Draw Unit	
 Name of Operator Ricks Exploration, Inc Address of Operator 210 Park Ave. STE 3000 Oklahoma Well Location 	ı City, OK 73102		8. Well No. 35 9. Pool name or W Indian Draw Delay	1	
Unit Letter I : Section 7	Township 22 10. Elevation (Show when 3099' GL	S Range 28E ther DR, RKB, RT, GR	NMPM Ed	dy County	
NOTICE OF INT	ppropriate Box to Indic FENTION TO: PLUG AND ABANDON	SI REMEDIAL W	JBSEQUENT REF ORK 🗆	PORT OF: ALTERING CASING	
TEMPORARILY ABANDON □ PULL OR ALTER CASING □	CHANGE PLANS [MULTIPLE [COMPLETION	COMMENCE CASING TES CEMENT JOE	T AND	PLUG AND ABANDONMENT	
OTHER: OTHER: OTHER: 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. Ricks Exploration requests to extend temporarily abandoned status for a period of 1 year to allow evaluation of recompletion potential in the area.					
Procedure 1. RU pump truck. Load annulus and Pressure test m	nust be done	on or before	1-31-02	729101112 RESTOR	
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 Dyell	TIT	o the best of my know. ΓLE <u>Engineer</u>		DATE <u>1/02/02</u> No. 405/516/1100	
Type or print name // Bryan Roth (This space for State use) APPPROVED BY Conditions of approval, if any:	000	LE Jul	d sup P	DATE / // 02	