

1 Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

clsr
dp

DISTRICT I
P.O. Box 1930, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

CONFIDENTIAL

WELL API NO. 30-015-26213
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name South Culebra Bluff 23
8. Well No. 2
9. Pool name or Wildcat E. Loving (Delaware)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3018.9 D.F.; 3019.7 RKB

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 ☐ DEC 4 '89

2. Name of Operator
RB Operating Company ✓ O. C.

3. Address of Operator
2412 N. Grandview, Suite 201, Odessa, Texas 79761 ARTESIA, NM

4. Well Location
Unit Letter L : 1920 Feet From The South Line and 660 Feet From The West Line
Section 23 Township 23-S Range 28-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3018.9 D.F.; 3019.7 RKB

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

Peterson Drilling Rig #2 spudded at 4:00 pm 11-2-89.

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

SIGNATURE F. D. Schoch TITLE Area Manager DATE 11-30-89

TYPE OR PRINT NAME F. D. Schoch TELEPHONE NO. (915) 362-6

(This space for State Use)

ORIGINAL SIGNED BY

APPROVED BY F. D. Schoch, DISTRICT II TITLE Area Manager DATE DEC - 7 1989

CONDITIONS OF APPROVAL, IF ANY: