

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240

District II  
1301 W. Grand Avenue, Artesia, NM 87711

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

Form C-103  
Revised March 25, 1999

WELL API NO.

30-015-26709

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

CANDIE "13"

8. Well No.

1

9. Pool name or Wildcat

E-LOVING (BRUSHY CANYON)

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

RAM ENERGY, INC.

3. Address of Operator

5100 E. SKELLY DR., STE. 650, TULSA, OK 74135

4. Well Location

Unit Letter M : 660 feet from the SOUTH line and 560 feet from the WEST line

Section 13 Township 23S Range 28E NMPM County EDDY

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

2479 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: PLUG BACK & RECOMPLETE ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

NRN WSH. PULL PODS & PUMP. NU BOP. PULL TBG & BHA. SET CIBP @ 6100'. PERFORATE BRUSHY CANYON FROM 5306-5338' & 5350-5394' W/4" HSC GUN, 2 SFF. ACIDIZE W/2000 GAL 7 1/2% HCL & BS. FRAC TREAT W/XL GEL & 16/30 SD. RECOVER LOAD & PUT WELL BACK ON PRODUCTION. WORK SCHEDULED TO START ON 10/28/02.

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

SIGNATURE Mike Kaiser

TITLE OP ENGR

DATE 10/24/02

Type or print name

MIKE KAISER

Telephone No.

(918) 655-2800

(This space for State use) ORIGINAL SIGNED BY TIM W. GUM

APPROVED BY

DISTRICT II SUPERVISOR

TITLE

DATE

OCT 30 2002

Conditions of approval, if any: