	vice C-10	
Submit 3 Copies To Appropriate District State of New Me		13
Office Energy, Minerals and Natur	ral Resources WELL API NO.) 9
1625 N. French Dr., Hobbs, NM 88240 District II	30-015-27008	
1301 W. Grand Ave., Artesia, NM 88210 UIL CONSERVATION	5. Indicate Type of Lease	
District III 1220 South St. Fran 1000 Rio Brazos Rd., Aztec, NM 87410	BIATE 28 * LL	
1000 Rio Brazos Rd., Aztec, NW 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No. V-2372	
87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU		"
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO	PR SUCH Cactus 16 State	
PROPOSALS.) 1. Type of Well:		
Oil Well X Gas Well Other	0 27 11 27	
2. Name of Operator	8. Well No. 1	
Ricks Exploration, Inc 3. Address of Operator	9. Pool name or Wildcat	
210 Park Ave, STE 3000 Oklahoma City, OK 73102	N Poker Lake Delaware Pool	
4. Well Location		
Unit Letter C: 330 feet from the <u>north</u>	line and 2310 feet from the west line	
	Range 31E NMPM Eddy County	
Section 10 Township 245	2	
3492' GR		
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐	REMEDIAL WORK ALTERING CASING [
PERFORM REMEDIAL WORK [] FLOG AND ADARDON []	_	
TEMPORARILY ABANDON X CHANGE PLANS \square	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING MULTIPLE	CASING TEST AND	
COMPLETION	CEMENT JOB	
OTHER:	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.		
1. RU PU. LD pump and rods. ND Wellhead. NU BOP. Release tbg anchor. TOOH w/ tbg and anchor		
 RU Wireline. Set CIBP @ 5950'. Dump bail 35' cmt on CIBP. TIH w/ tbg and SSN to 5800'. Displace hole w/ packer fluid. ND BOP. NU wellhead. Press test to 500#. 		
4. RD PU.		
	3141516772	
	Samuel)
REDCIMEN 12		
Notify QCD 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.		
Thereby certify that the anothration above is that and complete to the b		
SIGNATURE JUST STATE	<u>Engineer</u> <u>DATE 11/9/01</u>	
Type or print name Bryan Rother Telephone No. 405/516/1100		
(This space for State use)	1-01 D. D	
APPPROVED BY TITLE DATE 1/-/6-01		
Conditions of approval, if any:	¥	