Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-103
Revised 1-1-89

WELL API NO. 30-005-63536

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No. N/A

RECEIVED
JUN 19 '89
O. C. D.
ARTESIA, OFFICE

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)

7. Lease Name or Unit Agreement Name: DANIELS - DeCOSTA SULPHUR LEASE

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER) MINERAL EXPLORATION DRILL HOLE

2. Name of Operator: GOLD FIELDS MINING CORP

8. Well No. W.P #3

3. Address of Operator: 200 UNION BLVD, LAKEWOOD, CO 80228

9. Pool name or Wildcat: WILDCAT

4. Well Location
Unit Letter _____ : 1500 Feet From The EAST Line and 1000 Feet From The NORTH Line

Section 12 Township 15 S Range 26 E NMPM CHAVES County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3365' GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☒
PULL OR ALTER CASING	☐			CASING TEST AND 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.

Total Depth: 800 feet, vertical

Hole Dimensions: 8 3/4 inch hole and 7 inch casing to 54 feet; 5 inch hole to T.D.

Water-Bearing Strata: No water reported

Plugging: Date - December 2, 1988; well plugged from T.D. to surface with mud; mud type - Gel Pac; 10 minute gel strength - 41 lbs./100 sq. ft.; filtrate volume (API) - 11.2 cc

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

SIGNATURE [signature] TITLE SULPHUR MANAGER DATE 6/15/89

TYPE OR PRINT NAME MICHAEL B. THOMSEN TELEPHONE NO. (303) 988-0360

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: