State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-7-89

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

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

WELL API NO.
30-015-27849

5. Indicate Type of Lease
STATE [X]   FEE [ ]

6. State Oil & Gas Lease No.
E-5229

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

JAMES RANCH UNIT

1. Type of Well:
OIL WELL [X]   GAS WELL [ ]   OTHER RECEIVED

2. Name of Operator
BASS ENTERPRISES PRODUCTION CO.

3. Address of Operator
P.O. BOX 2760, MIDLAND, TEXAS 79702-2760 AUG 09 '94

8. Well No.
66

9. Pool name or Wildcat
UND DELAWARE

4. Well Location

Unit Letter __M__ : __990__ Feet From The __WEST__ O. C. D. Line and __660__ Feet From The __SOUTH__ Line
ARTESIA, OFFICE

Section __36__   Township __22S__   Range __30E__   NMPM   __EDDY__   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3290' 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 [ ]

OTHER: __EXTEND APD__   [XX]

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.

BASS ENTERPRISES PRODUCTION CO. WISHES TO EXTEND THIS APPLICATION TO DRILL FOR ANOTHER
SIX (6) MONTHS FROM AUGUST 10, 1994 TO FEBRUARY 10, 1995.

CERTIFIED # P 158 944 965
BAA/RMN 8/8/94

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

SIGNATURE __William R. Dannels__   TITLE __DIVISION DRILLING SUPT__   DATE __8/8/94__

TYPE OR PRINT NAME   WILLIAM R. DANNELS   TELEPHONE NO (915) 683-2277

(This space for State Use)

SUPERVISOR, DISTRICT II

SEP 6 1994

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: