	e de la servició de l	orano (t. 1 (j. j. l.) (d. <b>a</b> di.)	2 - 2		
Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103
District I	Energy, Minerals and Natural Resources			WELL ADINO	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240 District II	· · · · · · · · · · · · · · · · · · ·			WELL API NO. 30-045-30994	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE X FEE	
District IV	Santa Fe, NM 87505				Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505					
	CES AND REPORTS O	N WELLS		7 Lease Name	or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	SALS TO DRILL OR TO DEE	EPEN OR PL	UG BACK TO A	Ropco 16	n Omt Agreement Name.
1. Type of Well:		AE A	6789		
Oil Well Gas Well X	Other	A N	A		
2. Name of Operator		$\langle \hat{\nabla} \rangle$		7. Well No.	
Richardson Operating Company	<del></del>	eriorani e va	AN 2003 54	#3	
3. Address of Operator	- NIM 07401		EC	9. Pool name or	
3100 La Plata Highway, Farmingto 4. Well Location	n NM 8/401		CONS. DIV.	Basin Fruitland	& Twin Mounds PC Ext
4. Well Location		Vez 1	DIST. 3		
Unit LetterL_:	2506 feet from the	Sout	th line and	1006 feet from t	heWest line
Section 16	Township 29N	Ran	ige 14W	NMPM	County San Juan
	10. Elevation (Show 5175' GR				
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK		<b>и</b> П	REMEDIAL WORL		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB	4D 🗆	
OTHER: Extension of APD		Х	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.					
Richardson Operating Company requests that ADD expiration he extended for any sac-					
Richardson Operating Company requests that APD expiration be extended for one year.					
Apd Ext Exp. 1-7-04					
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•					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE		_TITLE Op	perations Manager		DATE 1/6/03
Type or print name Drew Carnes				Telephone No. (5	05) 564-3100
(This space for State use)	////	DEPU	TY THE R CAS INTEREST		JAN -7 2003
APPPROVED BY  Conditions of approval famus	Mysel	TITLE_	· · · · · · · · · · · · · · · · · · ·	- 7	DATE