Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 May 27, 2004	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 District II	Energy, without and water a resources		WELL API NO.	30-039-27720
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION		5. Indicate Type	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE 6. State Oil & Ga	FEE D
1220 S. St. Francis Dr., Santa Fe, NM 87505		BIA # 11		
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			7. Lease Name or Unit Agreement Name JICARILLA APACHE B	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other			8. Well Number 11 E	
2. Name of Operator ELM RIDGE RESOURCES, INC.			9. OGRID Number 149052	
3. Address of Operator P.O. BOX 156, BLOOMFIELD, NM 87413			10. Pool name or Wildcat OTERO GALLUP & BASIN DAKOTA	
4. Well Location	1077 NODE	DIT	065	штот
	1075 feet from the NOR			1
Section 19	Township 24N R 11 Elevation (Show whether DR	ange 5W 2, RKB, RT, GR, etc.)	NMPM	County RIO ARRIBA
9. 6,476' GL Pit or Below-grade Tank Application 🛭 or Closure 🗆				
Pit type Reserve Depth to Groundwater ~190' Distance from nearest fresh water well ~1550' Distance from nearest surface water ~700'				
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material				
12. Check A	Appropriate Box to Indicate N	Vature of Notice,	Report or Other	Data
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				ALTERING CASING
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB \square	
OTHER: RESERVE PIT	leted operations (Clearly state all	OTHER:	l give pertinent dat	es including estimated date
13. 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 recompletion.				
		JAN OF CO. S.	450 2005 2005 2007	
I hereby certify that the information grade tank has been/will be constructed or SIGNATURE Craig M. 5 Type or print name Craig M. For State Use Only APPROVED BY:	rekler TITLE (X, a general permit □ o	To west com	Active OCD-approved plan □. _DATE 12/30/04 elephone No. 505-466-812 JAN -4 2004
Conditions of Approval (if any):	TITLE	OR B UND ING	TELIUK DIST 53	DATE