

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-039-27405
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. BIA # 9	
7. Lease Name or Unit Agreement Name JICARILLA APACHE A	
8. Well Number	13
9. OGRID Number	149052
10. Pool name or Wildcat Blanco PC S & Ot. Chac.	

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.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other

2. Name of Operator ELM RIDGE RESOURCES, INC.

3. Address of Operator P.O. BOX 156, BLOOMFIELD, NM 87413

4. Well Location

Unit Letter C : 880 feet from the NORTH line and 1856 feet from the WEST line
Section 35 Township 25N Range 5W NMPM County RIO ARRIBA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6,836' GL

Pit or Below-grade Tank Application ☒ or Closure ☐

Pit type Reserve Depth to Groundwater ~524' Distance from nearest fresh water well ~4.2mi Distance from nearest surface water ~200'

Pit Liner Thickness: mil Below-Grade Tank: Volume bbls Construction Material

12. 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 ☐ MULTIPLE COMPL ☐

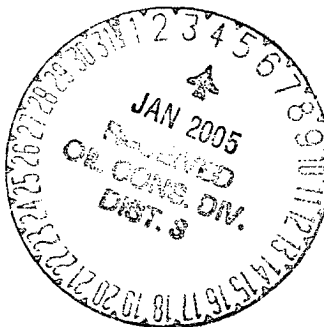
OTHER: RESERVE PIT ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

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.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Craig M. Fiehler TITLE Biologist DATE 12/30/04

Type or print name Craig M. Fiehler
For State Use Only

E-mail address: craig@permitswest.com
DEPUTY OIL & GAS INSPECTOR, DIST. 9

Telephone No. 505-466-8120

APPROVED BY: [Signature]

TITLE

DATE JAN - 4 2004

Conditions of Approval (if any):