| Office | istrict | State of Nev | v Mexico | : | Form C-103 |
|--|---|--|--|--|--|
| District I | Ene | rgy, Minerals and I | Vatural Resources | 1 | May 27, 2004 |
| 1625 N. French Dr., Hobbs, NM 8 | 8240 | -6,, 1,-111-1110 411-1 | | WELL API NO. | , , , , , , , , , , , , , , , , , , , |
| <u>District II</u> | 0.77 | G01/G7774 | | 30-039- | 20026 |
| 1301 W. Grand Ave., Artesia, NM | 88210 OIL | | ION DIVISION | 5. Indicate Type of Lease | |
| <u>District III</u> | | 1220 South St. | | STATE | FEE X |
| 1000 Rio Brazos Rd., Aztec, NM 8 | 37410 | Santa Fe, NI | M 87505 | 6. State Oil & Gas Lease No. | |
| District IV | NI | 250 | 7737475 | | |
| 1220 S. St. Francis Dr., Santa Fe, I | | EPORTS ON WELL | COLICIA | 7. Lease Name or Unit Agree | ment Name |
| (DO NOT USE THIS FORM FOR PRO | POSALS TO DRILL OR | . TO DEEPE N ÕR PLUG | BACK TO A | . Lease Name of Onit Agree | ment Name |
| DIFFERENT RESERVOIR. USE "API | PLICATION FOR PERM | IIT" (FORM © 301) FOR | SUCHI/ W | San Juan 28 | B-5 Unit |
| PROPOSALS.) | | | 30 00 E | | |
| 1. Type of Well: | . | 500 | 3 | 8. Well Number | |
| Oil Well Gas Wel | l X Other | | A STATE OF THE REST | 67 | |
| 2. Name of Operator RURLINGTON | J RESOURCES OF | L & GAS COMPAN | IATE CA | 9. OGRID Number 1453 | 8 |
| 3. Address of Operator | · icebookeep of | \$//0 | 097 | 10. Pool name or Wildcat | <u> </u> |
| 3401 E. 301 | H STREET, FARN | AINGTON, NM 824 | (02) 8 1 32 | Basin Dakota/ Basin | Fruitland Coal |
| 4. Well Location | : 1650 fe | et from theSo | uth line and | 800 feet from the | West line |
| Unit Letter L Section 21 | | Township 28N | Range 5W | NMPM Count | |
| Section 21 | | how whether DR, R | | | |
| 10000 | | 6645 | S' GR | | |
| Pit or Below-grade Tank Application | X or Closure | Ш | | | |
| Pit type New Drill Depth to | Groundwater >1 | 00' Distance from nea | rest fresh water well | >1000' Distance from nearest | t surface water >1000' |
| Pit Liner Thickness: | na mil | Below-Grade Tank: | Volume | bbls; Construction Materia | 1 |
| 12 C | heck Appropris | te Box to Indica | ate Nature of Noti | ice, Report or Other Da | ta |
| | OF INTENTIO | | | SUBSEQUENT REPO | |
| PERFORM REMEDIAL WORK | _ | IN TO. ID ABANDON | REMEDIAL | · · · · · · · · · · · · · · · · · · · | ALTERING CASING |
| TEMPORARILY ABANDON | CHANGE | | | | P AND A |
| PULL OR ALTER CASING | _ | E COMPL | - | EMENT JOB | . / |
| | | | | | |
| | 3371 | | □ OTUED: | | П |
| OTHER: | Workover | - (Classic state all s | X OTHER: | | |
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