State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.
30-045-32516

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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

Trinity

1. Type of Well

OIL WELL ☐   GAS WELL ☒   OTHER:

2. Name of Operator
ROBERT L. BAYLESS, PRODUCER LLC

8. Well No.
3

3. Address of Operator
P.O. BOX 168, FARMINGTON, NM 87499

9. Pool name or Wildcat
Basin Fruitland Coal

4. Well Location

Unit Letter A : 1240 Feet from the North Line and 920 Feet from The East Line

Section 22 Township 30N Range 12W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
5539 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: _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: First Delivery ☒

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.

The subject well first delivered at 11:00am, August 4, 2005.

[stamp: OCT 2005 RECEIVED OIL CONS. DIV. DIST. 3]

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

SIGNATURE _____   TITLE Petroleum Engineer   DATE 10/3/2005

TYPE OR PRINT NAME   Thomas McCarthy   TELEPHONE NO. (505) 326-2659

(This space for State Use)
APPROVED BY _____   TITLE SUPERVISOR DISTRICT # 3   DATE OCT 0 5 2005

CONDITIONS OF APPROVAL, IF ANY: