Submit 1 Copy To Appropriate District Office	(575) 393-6161 Energy, Minerals and Natural Resources		Form C-103
<u>District 1</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240			Revised July 18, 2013 WELL API NO.
<u>District II</u> – (575) 748-1283	OIL CONSERVATIO	N DIVISION	30-045-27167
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460			STATE X FEE
1220 S. St. Francis Dr., Santa Fe, NM 87505	,		B10894-11
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 Jake Johnson
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 1
2. Name of Operator			9. OGRID Number
Elm Ridge Exploration Co LLC			149052
3. Address of Operator PO BOX 156 Bloomfield, NM 87413			10. Pool name or Wildcat Bisti Lower Gallup
4. Well Location			
Unit LetterL:_1650_	feet from theSouth	line and990	feet from theWestline
Section 32	Township 25N	Range 11W	NMPM San Juan County
	11. Elevation (Show whether D	PR, RKB, R1, GR, etc	.,
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN PERFORM REMEDIAL WORK □			BSEQUENT REPORT OF:
TEMPORARILY ABANDON	PLUG AND ABANDON L CHANGE PLANS	REMEDIAL WOR	RK ☐ ALTERING CASING ☐ RILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM OTHER:	П	OTHER: RTP	×
			and give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of			
proposed completion or recompletion.			
Elm Ridge Exploration Co LLC returned this well to production on 1-7-14.			
		_	
			RCVD FEB 12'14
			OIL CONS. DIV.
			DIST. 3
Spud Date: 2-2-89	Rig Release	Date:	
I hereby certify that the information a	bove is true and complete to the	best of my knowledg	ge and belief.
A A			
SIGNATURETITLESr. Regulatory Supervisor DATE1-22-14			
$\mathcal{F}_{\mathcal{F}}$			
Type or print nameAmy Mackey E-mail address:amackey1@elmridge.net PHONE: _505-632-3476 For State Use Only			
APPROVED BY:	FOR RECORD TITLE		DATE FEB 2 7 2014
Conditions of Approval (if any):	MLE		DATE

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