Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II		30-045-32094
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No. NMNM-31311
	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)		WEST BISTI COAL 11
	Gas Well Other	8. Well Number 2 T
2. Name of Operator ELM RIDGE EXPLORATION CO	OMPANY, LLC	9. OGRID Number 149052
3. Address of Operator P. O. BOX 156, BLOOMFIELD, N	JM 87413	10. Pool name or Wildcat BASIN FRUITLAND COAL GAS
4. Well Location		
Unit Letter: I	1591' FSL & 1097' FEL	
Section 11		3 W NMPM SAN JUAN County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.,	
Pit or Below-grade Tank Application 🖳	6,346' GL	
	ater: >200' Distance from nearest fresh water well: >5,000' Dista	nnce from nearest surface water: >300'
Pit Liner Thickness: 12 mil		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING OTHER: DRILLING PIT	MULTIPLE COMPL CASING/CEMEN OTHER:	RILLING OPNS. P AND A
	letted operations. (Clearly state all pertinent details, and). SEE RULE 1103. For Multiple Completions: Attac	
		MAY 2006
		CO. 29515
has been/will be constructed or closed acco	apove is true and complete to the best of my knowledge raing to NMOCD guidelines [2], a general permit [2] or an (attack)	e and belief. I further certify that any pit or below-grade tanched) alternative OCD-approved plan DATE: MAY 17, 2006
SIGNATURE SIGNATURE	rfling to NMOCD guidelines [2], a general permit [2] or an (attac	DATE: MAY 17, 2006
I hereby certify that the information has been/will be constructed or closed according to the second signature. SIGNATURE Type or print name: BRIAN WOOD For State Use Only	rfling to NMOCD guidelines [2], a general permit [2] or an (attac	ched) alternative OCD-approved plan 🗖.
SIGNATURE Type or print name: BRIAN WOOD	rfling to NMOCD guidelines [2], a general permit [2] or an (attac	DATE: MAY 17, 2006 Telephone No.: (505) 466-8120