Office District I	Energy, Mineral	ls and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II	OH COMORT	NATIONAL TOR MOYON	WELL API NO. 30 - 043 - 21009
1301 W. Grand Ave., Artesia, NM 88210 District III		RVATION DIVISION ath St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Azec, NM 87410		Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Çulmi.	. 0, 1111. 01 000	
87505 SUNDRY NOT	ICES AND REPORTS	ON WELLS	FED NW 114365 7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC	SALS TO DRILL OR TO DE	EEPEN OR PLUG BACK TO A	Addition of Charles and Lands
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other		8. Well Number GEORGE * 1
2. Name of Operator	CARS ALEIT COREL	· · · · · · · · · · · · · · · · · · ·	9. OGRID Number
INTEGRA PETROLEUM INC.			240208
3. Address of Operator			10. Pool name or Wildcat
P.O. BOX 807 CAMAS WA 98607 4. Well Location			SOUTH SAN LUIS
Unit Letter N: 1069 feet from the South line and 2182 feet from the WEST line			
Section 28		18 N Range 3 W	NMPM County SANDOVAL
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 652 62			
Pit or Below-grade Tank Application M or Choure []			
Pit type DRILLING Depth to Groundwater 120' Distance from nearest fresh water well 3820 Distance from nearest surface water 1440			
Pit Liner Thickness: 12. mil	Below-Grade Tank:	Vokumebbls; C	onstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	ITENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDO	ON . REMEDIAL WOR	RK ALTERING CASING
TEMPORARILY ABANDON DULL OR ALTER CASING	CHANGE PLANS MULTIPLE COMPL	☐ COMMENCE DR ☐ CASING/CEMEN	HILLING OPNS. PANDA [
OTHER:		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.			
or recompletion.			•
APPLICATION FOR PIT PERMIT			
for record			·
for record			
* Accepted by the OCD on 5-16-07			
* Operator stated that he resubmitted permit after original permit was denicel, a resubmitted permit was not received by the OCD			
a resubmitted permit was not received by the OCD			
		,	
I hereby certify that the information	shate is true and com-	plate to the best of my knowled	ge and belief. I further certify that any pit or below-
grade tank has been/will be constructed or	r cluded according to NMEO	CD guidelines (2), a general permit [or an (attached) efternative OCD-approved plan [].
SIGNATURE MAA	h	TITLE ACENT	DATE 5/17/%
Time or ment come		D mail address.	Walankana NY
Type or print name DAULO For State Use Only	WILSON	E-mail address:	Telephone No. 595 270 - 7328
	c ~1		
APPROVED BY: Accepted Conditions of Approval (if any):	tor record	TITLE	DATE 5-16-07