

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised May 08, 2003

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-045-32021
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Blancett FC
8. Well Number 2A
9. OGRID Number 013998
10. Pool name or Wildcat Basin Fruitland Coal

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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Maralex Resources, Inc.	
3. Address of Operator P.O. Box 338, Ignacio, CO 81137	
4. Well Location Unit Letter <u>A</u> : <u>1000</u> feet from the <u>North</u> line and <u>780</u> feet from the <u>West</u> line Section <u>24</u> Township <u>30N</u> Range <u>12W</u> NMPM County <u>San Juan</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>5508' GR</u>	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Set Surface Casing <input checked="" type="checkbox"/>

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.

Ran 6 joints (246.07') of 8-5/8", 24#, 8RD STC surface casing, landed at 252'KB. Cement with 175 sxs (207ft<sup>3</sup>) with 2% cacl<sub>2</sub> plus 1/4#/sx flocele mixed at 15.6ppg. Displace with 15 BBl water, leaving 20 plus feet of cement inside casing. Shut in casing. Good circulation, circulated 20 BBls cement to surface. Job complete at 11:30AM 2/7/04.

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

SIGNATURE Carla S. Shaw TITLE Production Technician DATE 02/09/04  
Type or print name Carla S. Shaw Telephone No. 970/563-4000

(This space for State use)  
APPROVED BY Charles H. Shaw TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE FEB 10 2004  
Conditions of approval, if any: