Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office								
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	IL CONSERVATIO 2040 Pacheco		WELL API NO.					
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM		30 - 045 - 29644  5. Indicate Type of Lease					
DISTRICT III		AND SON	STATE X FEE C					
1000 Rio Brazos Rd., Aztec, NM 87410	C AND DEPORTS OF ME	OFCE VOO	O. State Off & Gas Lease IVO.					
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO	ES AND REPORTS ON WE PER SALS TO DRILL OR TO DESPENDING TO BE SALS TO BE SALS.	N OR PUG BOCK TO A	7. Lease Name or Unit Agreement Name Cuccia State Com					
1. Type of Well: OIL GAS WELL WELL WELL X	OTHER	COLSIVIEL DE						
2. Name of Operator Cross Timbers Operating Company			8. Well No. #7					
3. Address of Operator 2700 Farmington Ave., Bldg. K.		401	9. Pool name or Wildcat Basin Fruitland Coal					
4. Well Location Unit Letter K : 1565	Feet From The South	Line and162	20 Feet From The West Line					
Section 32	Township 27N Rai	nge 08W	NMPM San Juan, NM County					
	10. Elevation (Show wheth	er DF, RKB, RT, GR, etc 6279 GL	::)					
11. Check Appre	opriate Box to Indicate		ce, Report, or Other Data					
NOTICE OF INTEN	ITION TO:	SUB	SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	· ALTERING CASING					
FEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT					
PULL OR ALTER CASING		CASING TEST AND CE	EMENT JOB					
OTHER:		OTHER: Amended C	-102 X					
<ol> <li>Describe Proposed or Completed Operat work) SEE RULE 1103.</li> </ol>	ion\$Clearly state all pertinent de	tails, and give pertinent	dates, including estimated date of starting any propo					
Cross Timbers has changed the for the above mentioned wel		W/2 20 to a stand up.:	320 as shown in the enclosed C-102					
	1							
I hereby certify that the information above is true	$\eta_{\epsilon n}$							
SIGNATURE / / / /	To mu	Production Engi	neer DATE 5/30/00					
TYPE OR PRINT NAME Jeffery W. Pattor	1		TELEPHONE NO. 505-324-1090					
(This space for State Use)		BETUTY OIL & GAS	INSPECTOR DIST.					
APPROVED BY	MY mi	E	DATE 6-2-00					
CONDITIONS OF APPROVAL, IF ANY:	· <i>V</i>							

District I .PC Box 1980, Hobbs, NM 88241-1980

District II PO Drawer DO, Artesia, NM 88211-0719

District III 1000 Rio Brazos Rd. Aztec, NM 87410

District IV PO Box 2088, Santa Fe. NM 87504-2088

1620

565

5134.14

State Of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Revised February 2 (1994)
Submit to Appropriate District Diffice
State Lease - 4 Copies
Fee Lease - 3 Copies

JULY 14, Date of Survey

Certificate Nonth Property

MENDED REPORT

O 80x 2088.	Santa Fe.	NM 87504-2	2088							_			
			WELL	LOCAT	ION ANI	A C	CREAGE DED:	ICAT	ION PL	_AT			
'API Number				*Pool Code			'Pool Name						
			1	71629			BASIN FRUITLAND COAL						
*Property							Name			<del>  </del>	* W	ell Number	
02239	22394 CUCCIA ST						STATE COM				7 ·		
'OGRID No.						*Operator Name					*Elevation		
167067			CI	CROSS TIMBERS OPERATING COMP					PANY			6279'	
					<sup>10</sup> Surfa	ice	Location						
UL or lot no.	Section	Township	Range	Lot Ion	Feet from		North/South line	Fee	t from the	East/West 1	ine	County	
K	32	27N	8₩		1565	5	SOUTH	1620		WEST		SAN JUAN	
	<sup>11</sup> Bottom Hole Location If Different From Surface												
UL or lot no.	Section	Township	Range	Lot Idn	Feet from	the	North/South line	Fee	t from the	East/West 1	ıue .	County	
<sup>12</sup> Dedicated Acres		13 Jount or Infi	11 14 Cone	olidation Code	n more	<u></u>		<u> </u>				<u> </u>	
320						~.							
NO ALLOW	ABLE W	ILL BE AS OR A	SSIGNEI NON-ST	D TO TH ANDARD	IS COMPL UNIT HA	LETIO	ON UNTIL ALL EN APPROVED	INTE BY T	RESTS H	IAVE BEEN SION	CO	NSOLIDATED	
5151.96							1	17 OPERATOR CERTIFICATION I hardby centify that the information contained herein is true and complete to the best of my knowledge and belief					
			\				1			· — —	b,	/ <del></del>	
				1					Signatur Printed Printed	e h. M. Name	ark ark	estad lions	
5321,58	+		_	32				5334.78	Date  18 SURV  I hereby cert was plotted for under my s correct to the	EYOR CE	RTI 1 locat of acturate the	FICATION  Ion shown on this plane is surveys mode by me as some is true and	