

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 I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-045-26160

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Foothills C

8. Well No. 1

9. Pool name or Wildcat
Wildcat: Foothills-Fruitland San

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 James L. Ludwick	
3. Address of Operator Box 70, Farmington, NM 87499-0070	
4. Well Location Unit Letter <u>A</u> : <u>1070</u> Feet From The <u>North</u> Line and <u>945</u> Feet From The <u>East</u> Line Section <u>14</u> Township <u>30 N</u> Range <u>13 W</u> NMPM <u>San Juan</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5741 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: Request Extension for casing test ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

Due to the economic conditions at the present time, we hereby request an extension of time to perform the required casing integrity test until November 30, 1994.

RECEIVED
MAY 16 1994

OIL CON. DIV.
DIST. 3

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

SIGNATURE A. R. Kendrick TITLE Agent DATE 5/16/94
TYPE OR PRINT NAME A. R. Kendrick TELEPHONE NO. 334-2555

(This space for State Use)

APPROVED BY Original Signed by CHARLES GHOLSON TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE MAY 16 1994
CONDITIONS OF APPROVAL, IF ANY: