## Submit 3 Copies to Appropriate

## State of New Mexico

Form C-103

Inergy,	Mi	inerals	and	Natural	Resc	ources	Depar	tn
0	TT	CON	CDT	<b>37 A TT</b>	ONT	ппл	CTON	r

	Revised 1-1-89
VELL API NO. 30-045-30821	

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT I</u> P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATION 2040 Pacheco St.		WELL API NO. 30-045-30	21	
P.O. Box 1980, Hobbs, NM 88240  DISTRICT I			30-045-30	1827	1
				~ <b>~</b>	
	Santa Fe, New Mexico		5. Indicate Type of Le	256	
	Santa Pe, New Mexico	67505	STATE	FEE	X
DISTRICT I 1000 Rio Brazons Rd, Aztec, NM 8741	0		6. State Oil & Gas Lea	se No.	
SUNDRY N	OTICES AND REPORTS ON V	VELLS			
	M FOR PROPOSALS TO DRILL OR TO DEEPEN OR PL		7. Lease Name or Unit	Agreement Name	1996014
DIFFER	ENT RESERVOIR. USE "APPLICATION FOR PERMIT"	,		<b>J</b>	
	(FORM C-101) FOR SUCH PROPOSALS)				
1. Type of Well:			Lee		
OIL GAS	Proc. 1				
WELL WELL	X OTHER				
2. Name of Operator		" •	8. Well No.		
San Juan Resources	s of Colorado		#1E		
3. Address of Operator		ND ( 07/02	9. Pool name or Wildo	•••	
	ing, 7415 East Main Street, Farmington,	, NM 8/402	Blanco Me	esa Verde / Basin Dakot	a
4. Well Location Unit Letter F	1850 Feet From The North	Line and 1640	I	Feet From The West	Line
Section 30	Township 30N Range		NMPM		County
	10. Elevation (Show whether D 5709' GL	F, RKB, RT, GR, etc.)			
Check	Appropriate Box to Indicate Na	ature of Notice	, Report, or Ot	her Data	
11. NOTICE	E OF INTENTION TO:		SUBSEQUEN	T REPORT OF:	
PERFORM REMEDIAL W	OR PLUG AND ABAND	REMEDIAL WOR	K	ALTERING CASING	
TEMPORARILY ABANDO	N CHANGE PLANS	COMMENCE DR	ILLING OPNS.	PLUG & ABANDON	М
PULL OR ALTER CASING	;	CASING TEST A	ND CEMENT JOB		
OTHER: Extend AF	$\overline{X}$	OTHER:		7.4	
12. Describe Proposed or Cor SEE RULE 1103.	mpleted Operations (Clearly state all pertinent details	s, and give pertinent date	e, including estimated dat	e of starting any proposed work	c).
Please extend the A	APD for this well for another year.				

I hereby certify that the information above is true and complete to the be			
SIGNATURE	TITLE Agent/Engineer DATE	09/20/02	
TYPE OR PRINT NAME Paul C. Thompson	TELEPHONE NO. 327-4892		
(This space for State Use) APPROVED BY	DETAILS OF A SAME STATE OF THE DATE	SEP 84 200	

CONDITIONS OF APPROVAL, IF ANY: