

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. 30-045-29429
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 Steward Com
8. Well No. 1
9. 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 THOMPSON ENGR. & PROD. CORP.	
3. Address of Operator 7415 E. Main Farmington, New Mexico 87402	
4. Well Location Unit Letter <u>P</u> : <u>790</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>East</u> Line Section <u>28</u> Township <u>32N</u> Range <u>13W</u> NMPM <u>San Juan</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5983' GR	

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

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.

The Basin Fruitland Coal Formation was completed according to the attached Treatment Report.

RECEIVED
OCT 30 1997
OIL & GAS DIVISION

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

SIGNATURE Paul C. Thompson TITLE President DATE 9/30/97
TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY ERNIE BUSCH TITLE SEEDY OIL & GAS INSPECTOR, 101 DATE OCT 1997
CONDITIONS OF APPROVAL, IF ANY:

FRACTURE TREATMENT

Formation Basin FR Coal Stage No. 1

Date 8/29/97

Operator THOMPSON ENGR. & PROD. CORP. Lease and Well Steward Com #1

Correlation Log Type GR/CCL From 2135 To 1200

Temporary Bridge Plug Type _____ Set At _____

Perforations 2020 - 2055' Total of 70 (0.5") holes
2 Per foot type _____

Pad 15,000 gallons. Additives 20# x-linked Gel

Water 71,519 gallons. Additives 20# x-linked Gel,
Biocide, Enzyme Breaker, Surfactant, & "sand wedge"
Product.

Sand 20,000 lbs. Size 40/70
215,000 lbs. 12/20

Flush Incl. w/ above gallons. Additives _____

Breakdown _____ psig

Ave. Treating Pressure 1250 psig

Max. Treating Pressure 1390 psig

Ave. Injecton Rate 34 BPM

Hydraulic Horsepower _____ HHP

Instantaneous SIP 1236 psig

5 Minute SIP 1120 psig

10 Minute SIP _____ psig

15 Minute SIP 1000 psig

Ball Drops: None Balls at _____ gallons _____ psig
 _____ Balls at _____ gallons _____ psig
 _____ Balls at _____ gallons _____ psig

Remarks: _____

Walsh ENGINEERING & PRODUCTION CORP.