

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

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

Form C-103  
Revised May 08, 2003

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-037-20083
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Coulthurst Management & Inv. Inc.		6. State Oil & Gas Lease No.
3. Address of Operator 1990 Marin Ave. Berkeley CA 94707		7. Lease Name or Unit Agreement Name Dr. John
4. Well Location Unit Letter E : 1650 feet from the North line and 990 feet from the West line Section 13 Township 10N Range 27E NMPM County Quay		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4326 GR		9. OGRID Number
		10. Pool name or Wildcat Wildcat

12. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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.

5-01-04 Drilled out from casing. Drilled 12 1/4" hole to 3745".

5-06-04 Logged hole.

Ran 3740' 9 5/8ths J-55 36# casing.  
Cemented with 700 sks 50/50, 200 sks "c" neat.  
Circulated 207 sks to pit.

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

SIGNATURE David T. Wilson TITLE COMPANY REP DATE 6-7-04

Type or print name DAVID T WILSON Telephone No. 505-270-7328  
(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 6/16/04  
Conditions of approval, if any: