Sante Fe Main Office Phone: (505) 476-3441 General Information Phone: (505) 629-6116 Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us	**State of New Mexico** **Energy, Minerals and Natural Resources** **Oil Conservation Division** **1220 S. St Francis Dr.** **Santa Fe, NM 87505**	Form C-103 August 1, 2011 Permit 405347 WELL API NUMBER 30-025-53939 5. Indicate Type of Lease State 6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
BELL LAKE SOUTH STATE
COM

1. Type of Well:
Oil

8. Well Number
134H

2. Name of Operator
KAISER-FRANCIS OIL CO

9. OGRID Number
12361

3. Address of Operator
PO Box 21468, Tulsa, OK 741211468

10. Pool name or Wildcat

4. Well Location
Unit Letter J : 1650 feet from the S line and feet 2003 from the E line
Section 5 Township 24S Range 34E NMPM County Lea

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3588 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit Type _____ Depth to Groundwater_____ Distance from nearest fresh water well_____ Distance from nearest surface water_____

Pit Liner Thickness:_____ mil Below-Grade Tank: Volume_____ bbls; Construction Material_____

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON	☐	CHANGE OF PLANS	☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB ☐	
Other:				Other: **Spud**	☒

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.

12/8/2025 Spudded well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE	Electronically Signed	TITLE	DATE	12/19/2025
Type or print name	Christina Opfer	E-mail address christinaO@kfoc.net	Telephone No.	918-491-4468

For State Use Only:

APPROVED BY:	Keith Dziokonski	TITLE Petroleum Specialist A	DATE	12/22/2025