Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	LOT KSEC 187-25N-R-30E
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	Sainta 1 C, 14141 07505	
87505		38-059-20485
	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)	CATION FOR EXAMIT (FORM C-101) FOR SOCI	SOFINE
1. Type of Well: Oil Well	Gas Well Other	8. Well Number Sorts #1
2. Name of Operator		9. OGRID Number
KODIAL ENE	RE9 LTD	257794
3. Address of Operator	1	10. Pool name or Wildcat
460-734 7+2 AVE S.W. CALEARY AIBERTS 4. Well Location CANDON T2P38		
1		
Unit Letter LoT :	305 feet from the N line and	759 feet from the W line
Section /8	Township 25N Range 30 E	
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	:)
Pit or Below-grade Tank Application C		
Pit typeDepth to Groundw	vaterDistance from nearest fresh water wellDi	stance from nearest surface water
Pit Liner Thickness: mil	Below-Grade Tank: Volume bbls: C	Construction Material
12. Check A	Appropriate Box to Indicate Nature of Notice,	Report or Other Data
NOTICE OF IN		SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	- (
TEMPORARILY ABANDON		RILLING OPNS P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	IT JOB
OTHER: PERFROR	OTHER	П
12 Describe proposed or comp	oleted operations. (Clearly state all pertinent details, ar	ad give pertinent dates, including estimated date
of starting any proposed w	ork). SEE RULE 1103. For Multiple Completions: A	trach wellhore diagram of proposed completion
or recompletion.	JRJ. SEE ROLL 1103. 1 of Manaple Completions. 70	reacti ventore diagram of proposed completion
•		
DERF WERE	BONE OF SOFINE	= /
p E.c.		- 11
O A DEDIM	OF 2092 TOP 5HO	MIDDLE YESO
PERF WELL BORE OF SOFINE) O A DEPTH OF 2092 TOP SHOT MIDDLE YESD 2132 BTM SHOT ZONE		
2/52 3/11		
DATE PR	RFOD APRILO8-08	
DATE TE		1010
a= int	42 @ 1874 -1970	O GIORIETTA
PERF INT #2 @ 1874'-1970' GlORIETTA DATE PERFOO April 10-08 ZONE		
DATE	ERFOO APRIL 1000	
	42 B 2020' 1/166	& SANTA ROSA
PERIE IN.	#3 @ 1438-1466	SANTA KOSA
DATE TO	DERFUO APRILLZ-0	2 min
		200
The share of Cabasahair formation	shave is two and complete to the bost of my knowled	ro and haliof 16t
I nereby certify that the information	above is true and complete to the best of my knowleds closed according NMOCD guidelines [], a general permit [ge and belief. I further certify that any pit or below-
grade table has been will be constructed to		
SIGNATURE		
SIGNATORE // /	TITLE Compris	NY MAN DATE HORIUS-08
SIGNATURE 7 420	TITLE COMPTS.	NAU DATE ABRILIS-08
Type or print name	TITLE Composition E-mail address:	DATE ARIUS-08 Telephone No.
	4	recopnione tvo.
Type or print name	4	Telephone No. SUPERVISOR DATE 4/14/0 8