

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

Form C-103
Revised March 25, 1999

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

WELL API NO. 30-025-03433
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1439
7. Lease Name or Unit Agreement Name: WILSON A STATE
7. Well No. 2
8. Pool name or Wildcat WILSON YATES 7 RVRS ASSOC.

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD <input type="checkbox"/>	
2. Name of Operator HAL J. RASMUSSEN OPERATING, INC.	
3. Address of Operator 550 W. TEXAS, SUITE 200, MIDLAND, TEXAS 79701	
4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>NORTH</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>7</u> Township <u>21S</u> Range <u>35E</u> NMPM LEA County	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3693 GL	

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"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input 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"/>
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.	

Propose to ^T~~P&A~~ as follows:

1. Set CIBP @ 3570'
2. TEST CASING TO 500 PSI

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE CIBP TO BE APPROVED.

BEFORE EXAMINER
OIL CONSERVATION DIVISION
<u>OCD</u> EXHIBIT NO. <u>65</u>
CASE NO. <u>12758-A</u>

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

SIGNATURE Michael P. Jobe TITLE Agent DATE 10/31/01

Type or print name Michael P. Jobe

Telephone No. 915-687-1664

(This space for State use)

APPROVED BY GARY W. WINK TITLE NATURAL SCIENCE MANAGER DATE 11/9/2001

Conditions of approval, if any: