

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.  
30-025-03431  
5. Indicate Type of Lease  
STATE ☒ FEE ☐  
6. State Oil & Gas Lease No.  
B-1399

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 ☐ Gas Well ☐ Other SWD

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 L : 1370 feet from the SOUTH line and 1124 feet from the WEST line

Section 7 Township 21S Range 35E NMPM LEA County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3692 GL

7. Lease Name or Unit Agreement Name:  
SHELL STATE

7. Well No. 14

8. Pool name or Wildcat  
~~WILSON YATES 7 RVRS ASSOC.~~  
SWD

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☒ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

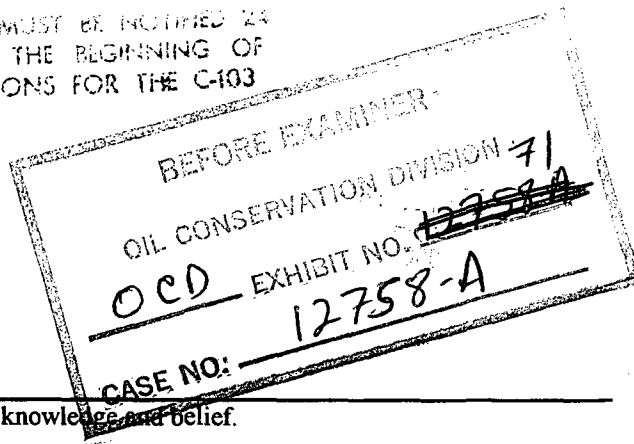
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Subject well has no Surface Casing

Propose to TA well as follows:

1. Set CIBP @ 3600'
2. TEST CASING TO 500 PSI

THE COMMISSION MUST BE NOTIFIED 24  
HOURS PRIOR TO THE BEGINNING OF  
PLUGGING OPERATIONS FOR THE C-103  
TO BE APPROVED.



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

SIGNATURE [Signature] TITLE Agent DATE 10/31/01

Type or print name Michael P. Jobe

(This space for State use)

Telephone No. 915-687-1664

APPROVED BY [Signature] TITLE NATURAL SCIENCE MANAGER - 2 DATE NOV 19 2001

Conditions of approval, if any: