

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

API #30-057-20008

|                        |  |
|------------------------|--|
| NO. OF COPIES RECEIVED |  |
| DISTRIBUTION           |  |
| SANTA FE               |  |
| FILE                   |  |
| U.S.G.S.               |  |
| LAND OFFICE            |  |
| OPERATOR               |  |

|                                |                                         |
|--------------------------------|-----------------------------------------|
| 5a. Indicate Type of Lease     |                                         |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |                                         |
| n/a                            |                                         |
| 7. Unit Agreement Name         |                                         |
| 8. Farm or Lease Name          |                                         |
| Shaw                           |                                         |
| 9. Well No.                    |                                         |
| 1                              |                                         |
| 10. Field and Pool, or Wildcat |                                         |
| Wildcat                        |                                         |
| 12. County                     |                                         |
| Torrence                       |                                         |

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> |
| 2. Name of Operator                                                                                              |
| RAF Enterprises                                                                                                  |
| 3. Address of Operator                                                                                           |
| P. O. Box 3487, Albuquerque, New Mexico 87190                                                                    |
| 4. Location of Well                                                                                              |
| UNIT LETTER <u>M</u> <u>371</u> FEET FROM THE <u>West</u> LINE AND <u>919</u> FEET FROM                          |
| THE <u>South</u> <u>18</u> <u>4N</u> <u>8E</u> LINE, SECTION <u>18</u> TOWNSHIP <u>4N</u> RANGE <u>8E</u> NMPM.  |

15. Elevation (Show whether DF, RT, GR, etc.)  
6350 GL

|                                                                              |                                                      |
|------------------------------------------------------------------------------|------------------------------------------------------|
| 16. 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"/>                               | REMEDIAL WORK <input type="checkbox"/>               |
| TEMPORARILY ABANDON <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>     |
| PULL OR ALTER CASING <input type="checkbox"/>                                | CASING TEST AND CEMENT JOBS <input type="checkbox"/> |
| OTHER <input type="checkbox"/>                                               | OTHER <input type="checkbox"/>                       |
| PLUG AND ABANDON <input type="checkbox"/>                                    | ALTERING CASING <input checked="" type="checkbox"/>  |
| CHANGE PLANS <input checked="" type="checkbox"/>                             | PLUG AND ABANDONMENT <input type="checkbox"/>        |

7. 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.

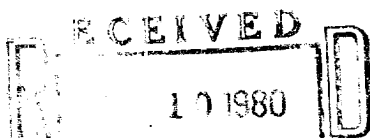
Well to be drilled to test Sangre de Cristo Formation, thoroughly, drill stem testing all shows anticipated, as per adjacent well drilled.

All state regulations requirements to be followed for all drilling and casing requirements.

To be plugged in accordance with State of New Mexico requirements, and in compliance with State regulations, should plugging be necessary.

Shelling depth for casing 175'.

Drilling contractor is Western Drilling, Inc.



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

OIL CONSERVATION DIVISION  
SANTA FE

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ DATE April 1980

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: