Submit 3 Copies To Appropriate District Office	State of	New Mo	exico		Form C-103
District 1	Energy, Minerals and Natural Resources			Revised June 10, 2003	
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONCERN	ZATION	DIVICION	WELL API NO 30 - 015	
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Typ	e of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505			STATE 6. State Oil &	Gas Lense No
1220 S. St. Francis Dr., Santa Fe, NM 87505				o. State Off &	Gas Lease 140.
SUNDRY NOT	CES AND REPORTS O			7. Lease Name	or Unit Agreement Name
(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				N. + ' - >	. + . 11 * +
PROPOSALS.)				8. Well Number	
1. Type of Well: Oil Well Gas Well Other				34 - B	,1
2. Name of Operator				9. OGRID Nur	mber
ERS RODOLINCOD LLC				225298)
3. Address of Operator BOU 958 Carlabad, Nr. 8821				10. Pool name	
4. Well Location	_000000000000111		2001	and the	00
Unit Letter B: 330 feet from the N line and 1650 feet from the E line					
Section 30	Township 11. Elevation (Show w		ange 38E R. RKB. RT. GR. etc	NMPM	County EDDY
					<u>《太皇》的《大学人》</u>
	Appropriate Box to It	ndicate N			
NOTICE OF IN PERFORM REMEDIAL WORK ☑	ITENTION TO:	u \square	REMEDIAL WOR	BSEQUENT R	
TEMPORARILY ABANDON	CHANGE PLANS	Ц	COMMENCE DR	RILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	****		CASING TEST A	AND	
OTUE D	COMPLETION	 1			L.
OTHER:	lated operations (Clear	ly state all	OTHER:	nd give pertinent o	lates including estimated date
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.					
pointut I mottod par, going & abor / w HOOG					
Poot w tubing, clean out fill w/bulldag bailer. put well an production on 2-24-04.					
ton of survey, while are their of survey when,					
put will an preduction OT 2-27-07.					
I hereby certify that the information	above is true and compl	ete to the	best of my knowled	lge and belief.	
SIGNATURE COY CO	moon	_TITLE_	serves		DATE 4-5-84
Type or print name Roy Have	Caprin	E-mail	address:		Telephone No. 515-341-3295
(This space for State use)	790		4	1 70	1111 1 000L
APPPROVED BY	0	TITLE	Lill	ALD P	
Conditions of approval, if any:				27	A paperson in the state of the