Submit 3 Copies To Appropriate Dis Office	strict	State of Ivew Ivication			Form C-103	
District I 1625 N. French Dr., Hobbs, NM 88240		Energy, Minerals and Natural Resources			Revised June 10, 2003 WELL API NO.	
District II	оп сом	IL CONSERVATION DIVISION			30-015-32931	
1301 W. Grand Ave., Artesia, NM 88210 UII District III			South St. Fran		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410			nta Fe, NM 87		STATE FEE 6. State Oil & Gas Lease No.	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NA	Sa	Santa Pe, 19191 67505			jas Lease No.	
87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name						
(DO NOT USE THIS FORM FOR P	Domino Federal					
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C. 101) FOR SUCH PROPOSALS.)						
1. Type of Well:					8. Well Number	
Oil Well Gas Well Other						
2. Name of Operator	(6 ULI 2000 T)				9. OGRID Number	
Nadel and Gussman Perm 3. Address of Operator	uan, L.	an, L.L.C. (© RECEIVED 1/2)			155615 10. Pool name or Wildcat	
601 N. Marienfeld, Suite	508		OCD - AF	ζω/		nated Morrow
4. Well Location	.,		\ < x	- 01.95	·	
Unit Letter	·	ooieet ifolii	me_Norm		ooleet non	the East line
Section 28		Townsl		Range 27E		Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
		TENTION TO			SEQUENT RI	
PERFORM REMEDIAL WOR		PLUG AND ABA		REMEDIAL WOR		ALTERING CASING [
TEMPORARILY ABANDON		CHANGE PLAN	s 🗆	COMMENCE DRI	LLING OPNS.	PLUG AND
PULL OR ALTER CASING		MULTIPLE		CASING TEST AN	ND 🖾	ABANDONMENT
	_	COMPLETION		CEMENT JOB		
OTHER:				OTHER:		
13. Describe proposed or	comple	eted operations. (Clearly state all p	pertinent details, and	d give pertinent da	ntes, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion						
or recompletion.						
9/16/03						
RU casers, RIH w/51 jts 9 -5/8" casing, 48# N-80 set @ 2320'. RU Schlumberger, cmt w/350 sx 50:50 Pos (20% escess, 11.8#/gal) lead cmt, tail w/200 sx Class C (20% excess, 14.8#/gal).						
Circ 135 sy cout to nit (mitnessed by RLM)						
WOC: 18 hrs.						
					[4	EP CO CO
					12	
						STAL STALE TO STALE STAL
WOC: 18 hrs. I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
1 0 0 0 0						
SIGNATURE SELVE	al	<u> </u>	TITLE	_Engineering Mana	ager	DATE / LL/03
Type or print name	Joel M	lartin	E-mail address	•	Telephone No.	432/682-4429
(This space for State use)						
APPPROVED BY			य गणा			DATE
Conditions of approval, if any:	WI	ens Fra	TITLE - Federal	141-11		
	V - /	J	1 60 6 m (00611		