Submit 3 Copies To Appropriate Office	·	f New Mexico	Form C-103 May 27, 2004
<u>District I</u> 1625 N French Dr., Hobbs, NM		ls and Natural Resource	WELL API NO.
District II 1301 W. Grand Ave , Artesia, N	A OIL CONGER	RVATION DIVISION	30-015-35828
District III	1220 Sou	th St. Francis Dr.	5. Indicate Type of Lease STATE FEE □
1000 Rio Brazos Rd, Aztec, NM District IV	197410	Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe.	, NM		
	Y NOTICES AND REPORTS	ON WELLS	7. Lease Name or Unit Agreement Name
(- +	R PROPOSALS TO DRILL OR TO DE E "APPLICATION FOR PERMIT" (FO		
PROPOSALS.)	·	KW C-101) FOR SUCIT	8. Well Number
1. Type of Well: Oil Wel	l ⊠ Gas Well □ Other	JAN 8 2008	Pinnacle State 16
2. Name of Operator	KI Exploration and Production,	UNIV - House	9. OGRID Number 246289
3. Address of Operator	Exploration and Froduction,	UUUMR ES	10. Pool name or Wildcat
	317 NW Expressway, Suite 950,	Oklahoma City, OK. 731	12 Bone Spring
4. Well Location			
	: <u>1152</u> feet from the <u>So</u>		
Section 36 T	ownship 22S Range 28E		·
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,085' GR			
Pit or Below-grade Tank Applic	ation or Closure	-,	15. Comment of the Co
Pit typeDepth to	GroundwaterDistance from 1	nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness:	mil Below-Grade Tank:	Volumebbl	s; Construction Material
12. (Check Appropriate Box to	Indicate Nature of No	ice, Report or Other Data
NOTICE	OF INTENTION TO:		SUBSEQUENT REPORT OF:
PERFORM REMEDIAL W		I	
TEMPORARILY ABANDO	<u> </u>	_	DRILLING OPNS. PAND A
PULL OR ALTER CASING	MULTIPLE COMPL	☐ CASING/CE	MENT JOB
OTHER:		□ OTHER:	Complete and Production Test
	or completed operations. (Clea		s, and give pertinent dates, including estimated date
of starting any propor recompletion.	posed work). SEE RULE 1103.	For Multiple Completion	s: Attach wellbore diagram of proposed completion
	letion rig operations on 12-17-0 @ 6900'. Pressure tested casin		agged DV tool @ 4,543'. Drilled out DV tool.
		•	_
			cement @ 1,100'. Perforated Bone Spring lized with 2,000 gals 7 1/2% HCL acid using 75
			00 gals. Medallion 3000 + 6,267 gals 30# gel
and 42,000 # 16/30	white sand + 9,800 # 16/30 res	in-coated sand.	
Cleaned out to 6,900'. Installed rod pump equipment and flow tested well.			
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I hereby certify that the info	ormation above is true and comp	lete to the best of my know	vledge and belief. I further certify that any pit or below-
			nit or an (attached) alternative OCD-approved plan .
SIGNATURE LINE			orintandant DATE 1909
	Linius	TITLE Production Sur	ermienuem DATE 1-0-00
Thurs	Siriu	TITLEProduction Sup	
Type or print name Gene S For State Use Only		TITLEProduction Sup	
For State Use Only	Simer FOR RECORDS ONLY		Telephone No. 575-885-1313
For State Use Only APPROVED BY:	FOR RECORDS ONLY		
For State Use Only	FOR RECORDS ONLY	E-mail address: gsimer(Telephone No. 575-885-1313