Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103	
Office District I	Energy, Minerals and Natural Resources		Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			30-015-21520	
District III RECEIVED 1220 South St. Francis Dr.			5. Indicate Type of Lease STATE FEE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV NOV 9 6 2003 Santa Fe, NM 87505			6. State Oil & Gas Lease No.	<del>-</del>
District IV NOV 2.6 2003 Santa Fe, NM 87505  1220 S. St. Francis Dr., Santa Fe, NM 87505				•
87505 CD	ARTESIA ICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreemen	t Nome:
(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			Jake State	
PROPOSALS.)  1. Type of Well:				
Oil Well Gas Well Other Proposed Re-Entry				
2. Name of Operator			8. Well No.	
Rubicon Oil & Gas, LLC 194266			2	
3. Address of Operator			9. Pool name or Wildcat S/W Black River Morrow	
400 West Illinois, Suite 1130 - Midland, Texas 79701 4. Well Location			3/W Black River Mollow	
i. Wen Boddon				
Unit Letter C	: 678 feet from the North	line and 2	feet from the Wes	t_line
	T 1: 040	D 065	) In my f	Eddy
Section 36		Range 26E	NMPM County	Luuy
10. Elevation (Show whether DR, RKB, RT, GR, etc.)  GR - 3358'				
11 Check	Appropriate Box to Indicate N	ature of Notice I	Report or Other Data	
	NTENTION TO:		SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK		REMEDIAL WORK		SING 🗌
		0014451105 001		
TEMPORARILY ABANDON			_LING OPNS.□ PLUG AND ABANDONMEN	т Ц
PULL OR ALTER CASING	MULTIPLE	CASING TEST AN		,
	COMPLETION	CEMENT JOB		
OTHER: Cancel Permit to	Do Enton	OTHER:		П
12. Describe proposed or complete	Ne-Lincel		ve pertinent dates including estima	ted date of
	SEE RULE 1103. For Multiple Com			
Rubicon Oil & Gas. LL	.C has elected not to re-	enter this we	ll. Therefore, we reque	st that
the Permit to Re-Enter this well, which was approved by Tim W. Gum on 3-31-2003 be				
	the date of this filing,			
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(6	15 COQUINA COFF)			
( ARRIED 1	15 COQUINA COFF)			
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I hereby certify that the information	ahove is true and complete to the h	nest of my knowledge	e and belief	
Thereby certify that the information	2 / / / / / / / / / / / / / / / / / / /	est of my knowledge	e and benef.	
SIGNATURE Narol	/ Discharation	Agent	DATE11-2	24-03
Toma on maint asset of a second			Tolorbana Na 42	2/6071102
Type or print name Datrol k			Telephone No. 432	2/00/-1192
(This space for State 148)	W. Gum	0.4.4	A	0 0 0000
APPPROVED BY	TITLE_	District Sy	DATE DEC	U Z ZUI3