•									
Submit 3 Copies to Appropriate District Office	192021222;	Harry, Minera	State of New als and Natural	Resources De	-			m C-103 rised 1-1-89	
DISTRICT	4	OILEON	SERVAT		MOIS				
P.O. Box 1980, Hobbs, NM 882	240 APR 2003	3 20	340 Pacheco S	L DIVIC	SICIA	WELL API NO.			
	• • •	٠ ا ٠	anta Fe, NM			30-005-6216			
DISTRICT II P.O. Drawer DD, Artesia, NM 8	OCD - ARTE					sIndicate Type of L		·	
DISTRICT III		$\omega$				State Oil & Gas L	STATE	FEE	
1000 Rio Brazos Rd., Aztec, NI	M 87410	-1.				Clair On a Gas L	ease No.		
		ES AND REP					e de la companya de La companya de la co		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"					CK TO A	7Lease Name or Unit Agreement Name			
5.11.21	(FORM C-10	1) FOR SUCH P	ROPOSALS.)	EKIMI		LYNX			
Type of Well:	GAS					1			
	WELL X		OTHER						
2Name of Operator N. DALE NICHOLS	,					eWell No. 1			
sAddress of Operator						»Pool name or Wik			
P.O. BOX 1972, MIDLA	ND, TX 79702	2		·		UND, FUSSL	EMAN		
1	. 1815 <sub>Fr</sub>	eet From The	NORTH	Line and	1980	Feet From Th	_ EAST	l ima	
				cire dire		reaction in		Line	
Section	19	Township	88	Range	29E	NMPM	CHAVES	County	
		3949 GF	n (Show whether D	F, RKB, RT, GR, e	tc.)				
11	Check App	ropriate Box	to Indicate I	Nature of No	tice, Re	port, or Other	· Data		
NOTIC	E OF INTE	ENTION TO	:		SUB	SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK		PLUG AND AB	BANDON	REMEDIAL W	ORK		ALTERING CAS	SING	
TEMPORARILY ABANDON	ā	CHANGE PLA	NS	COMMENCE	DRILLING O	PNS.	PLUG AND ANE	BANDONMENT 5	
PULL OR ALTER CASING	$\overline{\Box}$			CASING TES	T AND CEME	ENT JOB		· · · · · · · · · · · · · · · · · · ·	
OTHER:	<b>-</b>		ļ	,					
				OTHER:					
12Describe Proposed or Comple work) SEE RULE 1103.	rted Operations (0	Clearly state all perti	inent details, and g	ive pertinent dates,	including es	timated date of starti	ng any proposed		
Well is currently plugged	i. Only need t	o clean up locat	ion and install	dry hole markei	r				
4-1-03 Move out compa	any rig								
4-5-03 Clean up location	. Cut off dead	t men. Land ow	ner wants calid	the left like it is					
4-17-03 Install dry hole	marker.								
4-21-03 Well is ready fo	r inspection								

I hereby certify that the information above is true and complete to the best of my kno	wledge and belief.	
SIGNATURE JAB & LUCIO	TITLE MANAGER	DATE 04-21-2003
TYPE OR PRINT NAME JOHN E. NICHOLS	TE	ELEPHONE NO. 915-697-1576
(This space for State Use)		
(This space for State Use)		
(This space for State Use)  APPROVED BY  CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE