| Submit 3 Copies To Appropriate District Office | State of New Mexico Energy, Minerals and Natural Resources | | Form C-103 Revised June 10, 2003 |
|---|--|--|---|
| District I 1625 N. French Dr., Hobbs, NM 88240 | Energy, winerars and warder resolutions | | WELL API NO. 30-015-33409 |
| District II 1301 W. Grand Ave., Artesia, NM 88210 District III | OIL CONSERVATION DIVISION 1220 South St. Francis Dr. | | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | Santa Fe, NM 87505 | | STATE FEE 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | 2 | |
| SUNDRY NOTICES AND REPORTS ON WELLS (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 | | | 7. Lease Name or Unit Agreement Name COATS COM |
| PROPOSALS.) 1. Type of Well: | | | 8. Well Number |
| Oil Well Gas Well X | Other | RECEIVED | 1 |
| | TERN DRILLING COMPANY | AUG 1 6 2004 | 9. OGRID Number 009338 |
| 3. Address of Operator P.O. BOX MIDLAN | (1659 D, , TX 79702 | PO-ARTESIA | 10. Pool name or Wildcat ATOKA; PENN (GAS) |
| 4. Well Location | | | |
| Unit Letter A: 990 feet from the NORTH line and 990 feet from the EAST line | | | |
| omit Letter leet from the ime and leet from the ime | | | |
| Section 19 Township 18-S Range 26-E NMPM County EDDY 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | |
| 3,445' | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT | |
| PULL OR ALTER CASING | MULTIPLE COMPLETION | CASING TEST AND CEMENT JOB | |
| OTHER: | | OTHER: BLOW C | OUT 🛚 |
| 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. | | | |
| | | | |
| | | | |
| 8-12-04 Bit trip w/ TD 4901'. Well kicked and unloaded fluid when bit and 1 drill collar was left in hole. Killed well by bullheading 9.3 ppg | | | |
| cut brine. TIH and circulate with no gas bubbles. Return to normal drilling. (suspect driller did not fill hole on trip). | | | |
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| | | MOCD | |
| I hereby certify that the information above is true and complete to the pest of my knowledge and belief | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE DATE 08/13/2004 | | | |
| SIGNATURE (1) | ACCORD TITLE | ET KOLEUM ENGI | DATE 08/13/2004 |
| Type or print name ALAN ROBERT | S E-mail a | ddress: | Telephone No. |
| (This space for State use) | | | |
| APPPROVED BY | TITLE | | DATE |
| Conditions of approval, if any: | = | | |