Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO.
District II	OIL CONSERVATION DIVISION		30-015-24578-00-00
811 South First, Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No.
l e e e e e e e e e e e e e e e e e e e	CES AND REPORTS ON WEL		7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	CATION FOR PERMIT" (FORM C-101)	FOR SUCHEILIED	EIK State #2
PROPOSALS.) 1. Type of Well:		•	
Oil Well Gas Well	☐ Other	NOV 2 2 2004	
2. Name of Operator	отрали	QUEAHTERIA	8. Well No. #2
3. Address of Operator		2 -	9. Pool name or Wildcat
	Rd, Artesia, N.M.	, 88210	Artesia
4. Well Location			
Unit Letter N :	feet from the	line and	feet from theline
Section	Township 185	Range 28E	NMPM County EDDY
建建筑水平层流水平 对1000克	10. Elevation (Show whether	DR, RKB, RT, GR, etc.	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK		. REMEDIAL WORK	_
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN CEMENT JOB	a al
OTHER:		OTHER: Put	SIGN ON LOCATION &
12. Describe proposed or complete	ed operations. (Clearly state all p	ertinent details, and gi	ive pertinent dates, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.			
We Have replac	Ed Sign on loca	TION WITH	All required Information (WELL SIEN.)
Inspection #			(WELL STAN)
IPCH0428733331			
MR. PHIL HAWKINS			
Cotr Action Due Date = 11/30/2005			
	. <u> </u>		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE Jochey to	WeblTITLE	owner	DATE 11-18-04
Type or print name	ONEY B. WEBB		Telephone No. 505-748-2081
(This space for State use)		D	
A DDDD OVED DV	Tecord NMO	, -	DADEC 1 2004
APPPROVED BY Conditions of approval, if any:	Accepted for record TITLE		DATE