

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I

1625 N. French Drive, Hobbs, NM 88240

DISTRICT II

1301 Grand, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 South Pacheco  
Santa Fe, New Mexico 87505

RECEIVED

JAN 21 2005

ARTESIA

WELL API NO.

30-015-25454

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-5229

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 PROPOSALS.)

1. Type of Well:

OIL GAS  
WELL ☒ WELL ☐ OTHER

2. Name of Operator

STRATA PRODUCTION COMPANY

3. Address of Operator

P.O. BOX 1030, ROSWELL, NEW MEXICO 88202-1030

8. Well No.

#3

9. Pool Name or Wildcat

Forty Niner Ridge Delaware

4. Well Location

Unit Letter **F** : **2310'** Feet From The **North** Line and **1980** Feet From The **West** Line

Section **16** Township **23 South** Range **30 East** NMPM **Eddy** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3124' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: **change of name** ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☒

12. 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

Strata Production Company respectfully requests to change the name of the Forty Niner Ridge Unit #3 well to Forty Niner Ridge #3. The Forty Niner Ridge #3 well does not produce unitized substances. Therefore, it is not considered a unit well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kelly M. Britt TITLE Production Records DATE 01/20/05  
TYPE OR PRINT NAME Kelly M. Britt TELEPHONE NO. 505-622-1127 Ext 15

(This space for State Use)

TIM W. GUM

DISTRICT II SUPERVISOR

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

DATE

JAN 25 2005