Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	202122232	WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-20325
District III	1220 South St. Francis Dr. 🗟	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM/87505	6. State Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 8 7903 78 78 78 78 78 78 78 78 78 78 78 78 78	o. State on te das Lease No.
87505	OCD RECEIVED 85	
	CES AND REPORTS ON WEDDS ESTA SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (RORM C-101) FOR SUCH Gas Well Other	7. Lease Name or Unit Agreement Name CITY OF CARLSBAD
1. Type of Well: Oil Well	Gas Well Other 68499 vetv	8. Well Number 1
2. Name of Operator		9. OGRID Number
BOLD ENERGY, LP		233545
3. Address of Operator		10. Pool name or Wildcat
415 W. WALL STREET, SUITE 500, MIDLAND, TEXAS 79701		SOUTH CARLSBAD MORROW
4. Well Location		
Unit Letter O:	660' feet from the S line and	1980' feet from the E line
Section 25	Township 22S Range 26E	NMPM EDDY County
Pit or Below-grade Tank Application or Closure		
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water		
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF IN	ITENTION TO: SUE	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WOR	RK
TEMPORARILY ABANDON		ILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	IT JOB
OTHER:	C OTHER: CO	DDECT DDODUCING INTEDVAL
OTHER.	☐ OTHER: CO	RRECT PRODUCING INTERVAL
	leted operations. (Clearly state all pertinent details, an ork). SEE RULE 1103. For Multiple Completions: A	
09-01-1996 – POOH w/ pkr, set RB CO2.	P @ 10,830, set 10K Baker loc-set pkr @ 10,305, acd:	z Strawn perfs w/ 2,100 gak 15% HCL & 34 ton
See attached wellbore schematic.		
see anached welloute schematic.		
I hereby certify that the information	above is true and complete to the best of my knowled	ge and belief. I further certify that any nit or below-
grade tank has been/will be constructed or	closed according to NMOCD guidelines, a general permit	or an (attached) alternative OCD-approved plan .
SIGNATURE SAME SM	M/M)	DATE 0.15 0000
SIGNATURE XILLUSIY	TITLE_Regulatory Agent	DATE8-17-2006
Type or print name Shelli Fi	ncher E-mail address: Finchers@Grandecom.n	et Telephone No. 432-230-0195
ADDDOVED BY.		01.1.
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE 8 28 lob

