Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 May 27, 2004
1625 N. Frence Dr., Hobbs, NM 88240 District II	-	WELL API NO. 30-015 - 24612
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	,	E-329
SUNDRY NOTION	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIC	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	State M
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well 🔲 Other	8. Well Number
2 Name of Operator	for Pronghorn Management	9. OGRID Number
3. Address of Operator		10. Pool name or Wildcat  Red Lake
4. Well Location		
Unit Letter <u>M: 796</u> feet from the <u>S</u> line and <u>996</u> feet from the <u>W</u> line		
Section 36	Township 17-5 Range 77-E 11. Elevation (Show whether DR, RKB, RT, GR, et	
		C.)
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 type Depth to Groundwa Pit Liner Thickness: mil	Below-Grade Tank: Volume bbls;	<del></del>
	ppropriate Box to Indicate Nature of Notice	
	PLUG AND ABANDON 📈 REMEDIAL WO	RILLING OPNS. P AND A
OTHER:	OTHER:	, 
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.		
or recompletion.  1) Set 41/2" CIBAB 1200' Cap W/35' cm+		
Deine plagging MUD		
3) Land hole w/ 355x from 350' to Sourface		
•		
		Notify OCD 24 hrs. prior
		To any work done.
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit 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.		
0.11		2 2
SIGNATURE Mark Note	TITLE agent for	NMOCO DATE 4/17/09
Type or print name	E-mail address:	Telephone No.
For State Use Only	Audioval ore	mea proyiding_work . / ,
APPROVED BY:  Conditions of Approval (if any):	Cliffe TITLE is convoicte b	theo providing work  ov. 2/12/59: DATE 4/17/69

APPROVED BY: Conditions of Approval (if any):

Operator P. TOPS Well Twinship | Range ? 7 Unit API# Russ les Contact OCD 24 hrs. prior to any work done. Salt gel mud consisting of 10# brine with 25# of gel per barrel must be placed between each Install dry hole marker as per Rule 202.B.2 Plugs are to be set from point indicated up. Plugs must not be less than 100' or 25 Sacks of cement, whichever is greater, unless specifically indicated. Shoe and stub plugs will be 50' above and below shoe or stub and tagged. Surface plug will be from 0' - 60' Where plugs are required, cement must be placed inside and outside of all casing string(s) in the correct footage or sacks required, if no cement exists. Plugs to be tagged will be indicated. 11/2 - 1451

CINC.

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