

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

CISF

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM 101) FOR SUCH PROPOSALS.)		WELL API NO. 30 005 63494
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Ricks Exploration, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator 110 W. Louisiana, Ste 410 Midland, TX 79701		7. Lease Name or Unit Agreement Name: Moon
4. Well Location Unit Letter <u>G</u> : <u>1980</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>35</u> Township <u>8S</u> Range <u>29E</u> NMPM County <u>Chaves</u>		8. Well No. #1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4030' GR		9. Pool name or Wildcat Wildcat; Morrow

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> Prod csg & cmt.

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

09/27/02 Drilled to 8535'.  
09/30/02 Assumed operations @ 1:30 PM from Maralo, Inc.  
10/03/02 RU & ran 187 jts of 5-1/2" 17# N80 LTC csg & set @ 8535'. Cmt csg w/ 500 gal mud Clean II & 575 sxs 50/50 Poz CI H + additives. Circ & RD csg crew. Released rig @ 2PM 10/03/02.

OCT 2002  
RECEIVED  
Hobbs  
OCD

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

SIGNATURE Kim Stewart TITLE Regulatory Analyst DATE 10/14/02

Type or print name Kim Stewart Telephone No. 915/ 683-7443

(This space for State use)

APPROVED BY Record Only TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of approval, if any:

OCT 25 2002