Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office

DISTRICT I	_		OIL CO	NSERVA	NOITA	I DIVIS	ION							
	obbs, NM 88241-1980	2040 South Pacheco Santa Fe, New Mexico 87505							well api no 30-025-)			
BII S. First Street,	Axtesia, NM 88210								5. Indicate Type	of Lease	STATE	х	FEE	
DISTRICT III 1000 Rio Brizzos Rd., Azbac, NM 87410									6. State Oil & Gas Lease No. LG-5188					
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 SICH PROPOSALS.)									7. Lease Name or Unit Agreement Name					
(FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: OIL GAS WELL X WELL X OTHER									STATE "HQ"					
Name of Operator ELK OIL COMPANY									8. Well No. 7					
3. Addisss of Operator POST OFFICE BOX 310, ROSWELL, NEW MEXICO								310	9. Pool Name or Wildcat Airstrip Bone Spring					
4. Well Location Unit Letter	M	_ :	60 Fee	t From The	5	SOUTH	Line and	660		F	eet From The		NEST	Line
Section	26	Township	18	SOUTH			Range	34 EA	ST	имрм	LEA		County	,
			10). Elevation (Sho	w whether		f, GR, etc.)		*					
11.	NOTICE OF						ure of Not		ort, or Oth SUBSEQUI		a PORT OF	:	***************************************	
PERFORM REMI	EDIAL WORK		PLUG AND A	ABANDON			REMEDIAL	WORK			ALTERING CA	<i>i</i> sing		
TEMPORARILY ABANDON CHANGE PLANS							COMMENC	E DRILLING	OPNS.		PLUG AND A	SANDONM	ENT	X
PULL OR ALTER	CASING						casing tes	ST AND CEN	ient job					
OTHER:							OTHER:							
12. Describe Prop SEE RULE	posed or Completed O	perations (Clearly	state all pertine	nt details, and p	give pertirs	ent dates, inc	luding estimated	date of star	ting any propose	d work)		- Cod		~~.
	PLUG AND / 03/26/04: S 03/30/04: S 03/30/04: S 03/30/04: S 03/31/04: S 04/01/04: P 04/01/04: S 04/01/04: S	ET CIBP (POT 35 S POT 35 S POT 35 S POT 25 S ULL 704' (POT 75 S	@ 9002'. XS @ 900 XS @ 610 XS @ 408 XS @ 183 DF 5 1/2" (XS @ 771	2'-8666'. 6'-5770'. 1'-3745'. 0'-1591'. CASING. '-481' & T	ĀG.					16 BO 3 S	Hobs Co	L WAS TO SEE	7385	0.789
I hemby certify th	INSTALL DR	RY HOLE I	MARKER.	CIRCULA	ATE 10	O# MUD.	•							
SIGNATURE .	A STATE OF THE STA	and comp	eres to the best or	-	nd belief.	PRES	SIDENT				DAT	E	5/3/04	4
TYPE OR PRINT	NAME	GOSEPI	I J. KELL	<u> </u>						TELEPH	ONE NO.	505-0	323-319	0
(This space for State APPROVED BY CONDITIONS O	APPROVAL, IF AN	<u>ـ لىک. ر</u>	Sink	<u>. </u>	OC I	FIELD RI	EPRESENT	TATIVE I	I/STAFF M	IANAG	M ER DAT		3 200)4

Approved as to plugging of the Well Bore. Liability under bond is retained until surface restoration is completed.