

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

Form C-103
 May 27, 2004

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

WELL API NO. 30 025 24073
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-229
7. Lease Name or Unit Agreement Name GULF COOKIE STATE
8. Well Number 2
9. OGRID Number
10. Pool name or Wildcat Jalmat Tansil, Yates, Seven Rivers

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 Well Gas Well Other

2. Name of Operator
Hal J. Rasmussen Operating, L.P.

3. Address of Operator
550 W. TEXAS, SUITE 200, MIDLAND, TEXAS 79701

4. Well Location
 Unit Letter H : 2310 feet from the NORTH line and 900 feet from the EAST line
 Section 21 Township 23-S Range 36-E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3450 DF

Pit or Below-grade Tank Application or Closure

Pit type STEEL Depth to Groundwater 170 Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

SET CIBP @ 3300'; SET 25 SX CEMENT ON TOP.
 PERFORATED 4 1/2" @ 2790', SET 25 SX, TAG TOC @ 2575'.
 SET 25 SX CEMENT FROM 1246'-1566', NOT TAGGED, OK'D BY GARY WINK.
 PERFORATED @ 270', SET 35 SX PLUG @ +/-270', TAG TOC @ 170'.
 SET 20 SX PLUG FROM SURFACE TO 60', CUT AND REMOVE WELLHEAD, INSTALLED DRY HOLE MARKER.



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

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 .

SIGNATURE *Tommy Taylor* TITLE _____ AGENT _____ DATE 10/4/2004

Type or print name TOMMY TAYLOR E-mail address: ttaylor@tetratec.com Telephone No. 432 570 5382

For State Use Only
 APPROVED BY: *Gary W. Wink* TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 26 2004
 Conditions of Approval (if any): _____

OCT 26 2004