Submit 3 Copies To Appropriate District Office	State of New	Mexico	Form C-103
District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II			<b>WELL API NO.</b> 30-041-20255
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
	ICES AND REPORTS ON WE		7. Lease Name or Unit Agreement Name
(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			Told I among Con Andrew Hale
PROPOSALS.)			Todd Lower San Andres Unit  8. Well Number 326
1. Type of Well: Oil Well  Gas Well  Other  2. Name of Operator			9. OGRID Number
Latigo Petroleum, Inc.			227001
3. Address of Operator			10. Pool name or Wildcat
550 W. Texas, Suite	700 Midland, TX 79701		Todd;Lower San Andres (Assoc)
4. Well Location			
Unit Letter F:	1830feet from theNo	rthline and	1980 feet from the West line
Section 32 Township 07S Range 36E NMPM County Roosevelt			
	11. Elevation (Show whether 4117 GR	DR, RKB, RT, GR, etc	
Pit or Below-grade Tank Application			And the state of t
		sh water well 1000 Di	stance from pearest surface water 1000 !
Pit Liner Thickness: mil	Below-Grade Tank: Volume_	bbls; C	Construction Material
· · · · · · · · · · · · · · · · · · ·	Appropriate Box to Indicat	a Nature of Notice	Report or Other Data
12. Check 2	appropriate box to indicat		_
	ITENTION TO:	•	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	RK ALTERING CASING ALL RILLING OPNS. PAND A ALL
TEMPORARILY ABANDON DULL OR ALTER CASING	CHANGE PLANS  MULTIPLE COMPL	CASING/CEMEN	·
FULL OR ALTER CASING [	MULTIFLE COMPL []	CASITORCEME	
OTHER:		OTHER:	
13. Describe proposed or comp	pleted operations. (Clearly state	all pertinent details, a	nd give pertinent dates, including estimated date
of starting any proposed we or recompletion.	ork). SEE RULE 1103. For Mi	itupie Compieuons: A	trach wellbore diagram of proposed completion
	omt 6 /2201 -141-	20161 1.	1.1/01
3/22/05 Spot 25 sx. cmt. @ 4230', displace to 3816' in 4-1/2" csg, WOC & tag @ 3835'. $3/23/05$ Circulate holw w/ 60 bbls. salt gel mud, test csg. to $500%$ .			
3/24/05 Spot 25 sx. cmt. @ 2378', displace to 2000'.			
3/25/05 Jet cut 4-1/2" csg. @ 410' & pull.			
3/25/05 Spot 80 sx. cmt. @ 469', WOC & tag @ 232'.			
3/28/05 Spot 10 sx.	emt. @ 100' to surfa	ce.	
3/28/05 RDMO. Cut of:	f wellhead & anchors	, install dry	hole marker, and clean location.
	•		0101112/12
•			189
			<u> </u>
	opproved as to plugging o	fala Wan n	/m App 950E
	Liability under bond is reta	i tile Well Dore,	2 Received
	urface restoration is com	men mm	Hobbs
	The state of the s		hole marker, and clean location.  Received Hobbs OCD  Ge and belief. I further certify the Capy pit or below- or an (attached) alternative OCD approved plan [].
I hereby certify that the information	above is true and complete to t	he best of my knowled	lge and belief. I further certify the Cany pit or below-
grade tank has been/will be constructed or	r closed according to NMOCD guidel	ines 🔲, a general permit [	or an (attached) alternative OCD-approved plan
SIGNATURE	<u>,                                    </u>	g Agent	DATE 3/31/05_
Oldivitions for	int	115-110	DAIL 3/31/41
Type or print name Roger Mas	ssey <b>E-m</b> a	iil address:	Telephone No. (432) 530-0907
For State Use Only	, , , , , ,		•
APPROVED BY:	) ( ) La b anim	BELD REPRESENTA	TIVE II/STAFF MANAGER  DATE
Conditions of Approval (if any):		KLLD KLI KLOSE W	UAIL
			APR 1 1 2005