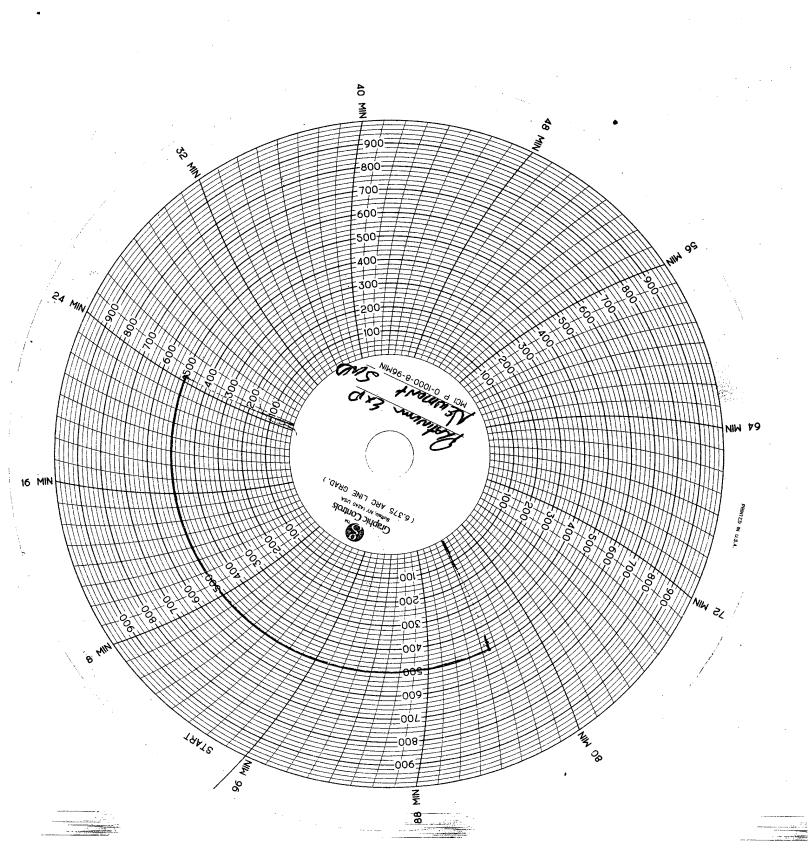
Submit 3 Copies To Appropriate District Office District I State of New Mexico Energy, Minerals and Natural Resources	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-07154 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 South St. Francis Dr. Santa Fe, NM 87505	STATE FEE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No. 34354
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	7. Lease Name or Unit Agreement Name New mond
PROPOSALS.)	8. Well Number 1
1. Type of Well: Oil Well Gas Well Other SWD 2. Name of Operator	9. OGRID Number
Platinum Exploration, Inc.	227103
3. Address of Operator 550 W. Texas Ave, Ste 500, Midland, TX 79705	10. Pool name or Wildcat SWD; Devonian
4. Well Location	उक्ता । जन्मात्म
Unit Letter K : 1980 feet from the South line and 1980 feet from the West line	
Section 7 Township 12S Range 38E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Lea County
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 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 PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRII	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	_
OTHER: OTHER: Mechan	ical Integrity Test – chart attached
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.	
	12526222
	4.25. EL ST 1101 0.8 r.
SWD: 943	
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 Slovia Holcomb TITLE Agent	DATE_05/03/05
Type or print name Gloria Holcomb E-mail address: gholcomb@t3w	rireless.com Telephone No. (432) 687-1664
For State Use Only	
APPROVED BY: APPROVED BY: Conditions of Approval (if adv): DATE: MAY 0 9 2005	
Conditions of Approval (if any):	
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COMPANY LEASE WELL # MANUAGE SURFICASING
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