	State of New Mexico		
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			May 27, 2004 WELL API NO. 30-025-02531
			5. Indicate Type of Lease
			STATE X FEE
1220 S. St. Francis Dr., Santa FE, NM CONSERVATION			8-6717
SUNDRY NOTICES AND REPORTS ON WELLS			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 PROPOSALS.)			Amerada State
1. Type of Well: Oil Well X Gas Well Other			8. Well Number 3
2. Name of Operator Hal J. Rasmussen Operating, LP			9. OGRID Number
3. Address of Operator PO Box 2517 Midland, TX 79702			10. Pool name or Wildcat Yates Seven Rivers Swd
4. Well Location			
	om the North	line and]	
	ship 21S R		NMPM Lea County
11. Elevation (S	3651 GL	, RKB, RT, GR, etc.	
Pit or Below-grade Tank Application or Closure			
	from nearest fresh v		tance from nearest surface water
Pit Liner Thickness: mil Below-Grade T			onstruction Material
12. Check Appropriate Box	x to Indicate N	lature of Notice,	Report or Other Data
NOTICE OF INTENTION TO) :		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABA	_	REMEDIAL WOR	
TEMPORARILY ABANDON	=	COMMENCE DR CASING/CEMEN	<u>==</u>
FOLL OR ALTER CASING MOLTIFLE CON	VIPC [_]	CASING/CEMEN	11 308
OTHER:		OTHER:	
 Describe proposed or completed operations. of starting any proposed work). SEE RULE or recompletion. 			ttach wellbore diagram of proposed completion
4/22/05 1. Spot 20 sx. cmt. 3 2095' 4/25/05 2. Tag. TOC @ 1850'. 3. Szq 1 BPM @ 750', WOC & tag 329' - surface.	. 40 sx. cr	$nt.w/\ 2\%\ CaC$	Cl thru perfs @ 1800' @
4/26/05 5. Tag TOC @ 26'. 6. Mix &	circulate l	0 sx. cmt. 2	26' - surface 7 PDMO
Cut off wellhead & ancho	rs, install	dry hole ma	arker, and clean location.
		•	,
			$i\hat{\phi}$
Approved as to plugging of the	33.7.11 D		
Approved as to plugging of the Liability under bond is retained	Well Bore.		
surface restoration is completed	until		
ominet restoration is completed	.		
I hereby certify that the information above is true and grade tank has been/will be constructed or closed according to N	complete to the b	est of my knowledg □, a general permit □	ge and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan .
SIGNATURE My	TITLE	Agent	DATE 4/29/05
Type or print name Roger Massey	A E-mail ac	ldress:	
For State Use Only	. 1		Telephone No. 432/530-090 STAFF MANAGER
APPROVED BY: Lary W. Wink			
Conditions of Approval (if any):	TITLE_	· · · · · ·	DATE 1 6 2005
<i>U</i>	1. The extrability source		·· 1 0 200 5