

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

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.)		WELL API NO. 30-025-02577
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Hal J. Rasmussen		6. State Oil & Gas Lease No. E-1830
3. Address of Operator 550 W. Texas Ave, Ste 500 Midland, TX 79701		7. Lease Name or Unit Agreement Name Wilson State
4. Well Location Unit Letter <u>J</u> : <u>2310</u> feet from the <u>South</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>23</u> Township <u>21S</u> Range <u>34E</u> NMPM County <u>Lea</u>		8. Well Number <u>2</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3662' GR		9. OGRID Number
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Wilson Yates 7 RVRs
Pit type <u>Steel</u> Depth to Groundwater <u>119'</u> Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

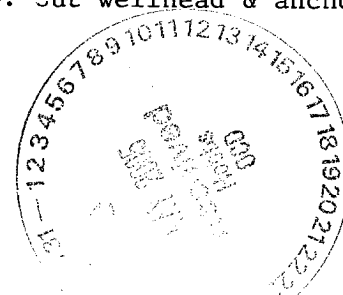
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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.

4/26/05 1. Notify NMOCD Buddy Hill. 5/9/05 2. Spot 275 sx. cmt. @ 878' (All plugs as per OCD Gary Wink - Buddy Hill). 5/10/05 3. Tag TOC @ 654'. 4. Spot 50 sx. cmt. w/2% CaCl, WOC & tag TOC @ 545'. 5. Perforate @ 266'. 6. Spot 100 sx. cmt. @ 266'. 5/11/05 7. Tag TOC @ 198'. 8. Perf. @ 198'. 9. Mix & pump 100 sx. cmt. w/ 2% CaCl @ 198', WOC & tag TOC @ 146'. 10. Mix & spot 100 sx. cmt. @ 146'. 5/12/05 11. Tag TOC @ 40'. 12. Mix & circulate 50 sx. cmt. 40' - surface. 13. Cut wellhead & anchors, install dry hole marker, and clean location.

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 Roger Massey TITLE Agent DATE 5/20/05

Type or print name Roger Massey
For State Use Only

E-mail address:

Telephone No. (432) 530-0907

APPROVED BY: Gary W. Wink TITLE _____
Conditions of Approval (if any):

OC FIELD REPRESENTATIVE II/STAFF MANAGER
MAY 31 2005