Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Minerals	and Natura	I Resources	WELL API NO.	Revised March 25, 1999
District II 811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION				30-025-36251	
District III 2040 South Pacheco			5. Indicate Type o	I	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505				STATE 6. State Oil & Gr	FEE X
2040 South Pacheco, Santa Fe, NM 87505				o. State Off & Gr	as Lease Ivo.
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 X Gas Well Other				7. Lease Name or Burrus 23	Unit Agreement Name
2. Name of Operator Ricks Exploration, Inc.				8. Well No. 1	
3. Address of Operator 550 W. Texas Ave., Suite 1300 Midland, Texas 79701				9. Pool name or Wildcat Trinity; Wolfcamp 59890	
4. Well Location				Trinity, Woncamp 39890	
Unit Letter L : 19 Section 23	feet from the Township 12 Township 12 Township 12	2S R	line and 660	feet from	the West line County Lea
terest is the specific	3795' GR				
11. Check App	propriate Box to In	idicate Na			
NOTICE OF INTI PERFORM REMEDIAL WORK [PLUG AND ABANDO	N 🗀	REMEDIAL WOR	SEQUENT REF	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOBS	ND X	, B, at B B time it
OTHER:			OTHER:		
 12. Describe proposed or completed of starting and proposed work). So or recompletion. 6-15-03 TD'd 7 7/8" hole @ 9235'. 6-16-03 Ran 30 centralizers. Ran 21 10% gel + 5# Gilsonite + 1/4# Cello. Displaced w/fresh water. Plug down 	SEE RULE 1103. For 1 jts. 5 1/2" 17# N-80 Tailed w/475 sx 50/5	Multiple C LTC csg. D Poz H +	ompletions: Attach of set @ 9235'. Cmt'd	liagram of proposed w/575 sx lead 50/50	completion Poz H + 5% salt +
I hereby certify that the information a	bove is true and comp	olete to the	best of my knowledg	ge and belief.	
SIGNATURE DO NO A	Coxfm	TITLE <u>I</u>	Regulatory Analyst		DATE 06/18/2003
Type or print name Brenda Coffman				Telepl	none No. (432)685-4373
(This space for State use)	1. 7.1	OC FIEL	D REPRESENTATIV	E II/STAFF MANAC	_{ger} JUN 2 0 200
APPROVED BY	U.Wink	_TITLE_	· · · · · · · · · · · · · · · · · · ·	1	DATE