Office	of New Mexico als and Natural Resourc	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	ais and matural Resource	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSE	<b>RVATION DIVISIO</b>	N 03-025-01070 5. Indicate Type of Lease
District III 1220 So	uth St. Francis Dr.	STATE STATE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa	Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		32443
SUNDRY NOTICES AND REPORTS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO D DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (F	EEPEN OR PLUG BACK TO	A 7. Lease Name or Unit Agreement Name LAWTON STATE
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Cher		8. Well Number 2
2. Name of Operator ASHER ENTERPRISES		9. OGRID Number 149538
3. Address of Operator		10. Pool name or Wildcat
PO BOX 423		ATOKA
4. Well Location		
Unit Letter P660feet from	theS line a	nd660feet from theEline
Section 10 Townshi		33E NMPM County LEA
한 방법 등 방법 등 것 같은 것	whether DR, RKB, RT, C	iR, etc.)
Pit or Below-grade Tank Application 🗌 or Closure 🗌		
	nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness: mil Below-Grade Tank:		bls; Construction Material
12. Check Appropriate Box to	Indicate Nature of N	
NOTICE OF INTENTION TO:		
PERFORM REMEDIAL WORK PLUG AND ABAND TEMPORARILY ABANDON CHANGE PLANS		L WORK   ALTERING CASING  CE DRILLING OPNS.  P AND A
PULL OR ALTER CASING MULTIPLE COMPL		EMENT JOB
		CE DRILLING OPNS. PANDA EMENT JOB
	OTHER:	
13. Describe proposed or completed operations. (Cle	arly state all pertinent det	ails, and give pertinent dates, including estimated date
		ons: Attach wellbore diagram of proposed completion
or recompletion.		101
1. SET CIBP @ 11,350'		AN AN
2. PERFORATE 11,138-11,148'		
3. ACIDIZE & TEST ZONE, IF COMMERCIAL F		
4. WE PLAN TO START THIS PROCEDURE MI	D TO LATE JULY. WHI	ENEVER A PU BECOMES AVAILABLE
I hereby certify that the information above is true and com grade tank has been/will be constructed or closed according to NMO		
	·	
SIGNATURE KILLY YMLS	_TITLE_UGent	DATE 6-28-05
Type or print name	E-mail address:	Telephone No.
For State Use Only		
SIM		TROLEUM ENGINEER DATE
APPROVED BY:	TITLEPE	TRULLON DATE
Conditions of Approval (if any):		JOL 0 1 2005
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