Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resource	S May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONGERNATION DIVISION	312-n25-09117
1301 W. Grand Avc., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505	STATE X FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Pe, NW 67303	6. State Oil & Gas Lease No.
87505	CCCC AND DEDODES ON WELL C	32447
	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLI	CATION FOR PERMIT" (FORM C-101) FOR SUCH	Scucn Rivers Queen Unit
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other	8. Well Number # / 8
2. Name of Operator	4	9. OGRID Number
3. Address of Operator	Resources Inc.	220420 10. Pool name or Wildcat
	Site Ing Tile OL A	
4 920 S. Lewis, Suite 107 Tulsa Ot 74105 Seven Rivers Queca		
Unit Letter Q: 660 feet from the N line and 660 feet from the will line		
Section 35 Township 225 Range 36 E NMPM Leq County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application 🔲 o	- Cleans	The Court of the C
		Distance from manual surface mater
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF IN	· · · · · · · · · · · · · · · · · · ·	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL	——————————————————————————————————————
TEMPORARILY ABANDON	_	E DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CE	MENT JOB []
OTHER: OTHER:		
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.		
Test Cosins. Chs out well head. Pump scale contenter. Acidize Perts 3605-3773		
rump scale contenter. Acidite Perts 3605-3773		
Put well on pump 8-5-05.		
8-11-05 6861s 0:1, 4mc = gas, 36861s water 1232425262		
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		Se Contraction of the Contractio
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		21101019
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 anny	M Jalme TITLE Froduct	ion Foremen DATE 8-16-05
Type or print name	m Palm. (E-mail address:	Telephone No. 505-738-1739
For State Use Only	E-mail address:	FATIVE WISTAFF MANAGER
For State Use Only OF FIELD REPRESENTATIVE II/STAFF MANAGER APPROVED BY: APPROVED B		
APPROVED BY:		
<i>V</i>		