Submit 3 Copies To Appropriate District Office Province A		State of New Mexico ergy, Minerals and Natural Resources		Form C-103 May 27, 2004
District I Energy, Wilherais and Natural Resources 1625 N. French Dr., Hobbs, NM 88240				ELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION				0-025-05369
District III 1220 South St. Francis Dr.			ncis Dr.	Indicate Type of Lease STATE ☐ FEE ☐
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			7505	State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, 87505	NM		s	WD-044
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				Lease Name or Unit Agreement Name BO SWD SYSTEM
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other SWD WELL				Well Number F-31
2. Name of Operator RICE OPERATING COMPANY				OGRID Number
3. Address of Operator). Pool name or Wildcat
122 W. TAYLOR, HOBBS NM.				
4. Well Location				
Unit Letter	F_:2310'	_feet from theNO	ORTH line and	2626'feet from theWESTline
Section	31	Township 16S	Range 37E	NMPM JEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3839' GL				
Pit or Below-grade Tank Applic	ation or Closure		137 GE	Kare
		Distance from nearest fresh v	vater well Distanc	e from nearest surface water
Pit Liner Thickness:	mil Below-	Grade Tank: Volume	bbls; Consti	ruction Material
12. (Check Appropris	ate Box to Indicate N	lature of Notice. Re	port or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐				
TEMPORARILY ABANDO		ND ABANDON ☐ E PLANS ☐	REMEDIAL WORK COMMENCE DRILLI	☐ ALTERING CASING ☐ ☐ NG OPNS.☐ P AND A ☐
PULL OR ALTER CASING		LE COMPL	CASING/CEMENT JO	
				_
OTHER:	or completed oner	ations (Clearly state all :	OTHER:	ve pertinent dates, including estimated date
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.				
or recompletion.				
Well Failed MIT. Will pull tubing and investigate problem. Start date 11-14-05				
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I hereby certify that the angular tank has been/will begans	tmation above is tr	ue and complete to the b	est of my knowledge ar □, a general permit □ or a	nd belief. I further certify that any pit or below- in (attached) alternative OCD-approved plan
I hereby certify that the infograde tank has been/will be and	rmation above is tr	nue and complete to the b ding to NMOCD guidelines [TITLE	est of my knowledge al □, a general permit □ or a Operation Manager	Id belief. I further certify that any pit or below-
grade tank has been/will befairs SIGNATURE	ructed or closed accor	ding to NMOCD guidelines [, a general permit or a	nd belief. I further certify that any pit or below- in (attached) alternative OCD-approved plan
grade tank has been/will befairs SIGNATURE	fmation above is triructed or closed accor	ding to NMOCD guidelines [, a general permit 🗖 or a	nd belief. I further certify that any pit or below- in (attached) alternative OCD-approved plan .
SIGNATURE Type or print name For State Use Only	ructed or closed accor	TITLE E-mail address:	, a general permit ☐ or a Operation Manager scurtis@riceswd.com	nd belief. I further certify that any pit or below- in (attached) alternative OCD-approved plan DATE 11-11-05 Telephone No. 393-9174
SIGNATURE Type or print name So	cott Curtis	TITLE E-mail address:	, a general permit or a	nd belief. I further certify that any pit or below- in (attached) alternative OCD-approved plan DATE 11-11-05 Telephone No. 393-9174

