Submit 3 Copies To Appropriate District Office	2000 021101121222				Form C-103		
District I					May 27, 2004 WELL API NO. 30-025-34239		
625 N. French Dr., Hobbs, NM 88240 District II 201 W. Grand Ave. Artesia, NM 88210 OIL CONSERVATION DIVISION					WELL ALTIN	0. 00-020	7 0 1200
1301 W. Grand Ave., Artesia, NM 88210	. Claid Ave., Artesia, Nivi 60210						
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.				5. Indicate Type of Lease		
District IV	Santa Fe, NIVI 87303				STATE FEE 6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505					6. State Oil &	C Gas Lease	No.
SUNDRY NOTICES AND REPORTS ON WELLS					7. Lease Name or Unit Agreement Name		
(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					New Mexico State 'C'		
PROPOSALS.)					8. Well Numl	ber 3	
1. Type of Well: Oil Well Gas Well Other					9. OGRID Ni	· · · · · · · · · · · · · · · · · · ·	
2. Name of Operator Paladin Energy Corp.					9. OGRID N	umoer	
3. Address of Operator 10290 Monroe Dr., Suite 301					10. Pool name or Wildcat		
Dallas, Texas 75229					King Cisco		
4. Well Location							
Unit Letter <u>E</u> :	1550feet from the	North	line and _	10	feet from the _	West	line
Section 36	Township	13S	Range	37E	NMPM	Lea	County
11. Elevation (Show whether DR, RKB, RT, GR, etc.,							
Pit or Below-grade Tank Application O	Closure 🗆	3845	GK				
		rom nearest f	resh water wel	l 1 mile	Distance from	nearest surf	ace wate 1 mile +
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data							
NOTICE OF INTENTION TO: SUB					SEQUENT	REPORT	r OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIA							RING CASING 🔲
TEMPORARILY ABANDON						_) A 🔲
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/C	EMEN	TJOB L		
OTHER: Temporarily	Abandon	\boxtimes	OTHER:				
13. Describe proposed or compl	eted operations. (Clear	ly state all	pertinent det	ails, an	d give pertinent	dates, inclu	iding estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.							
or recompletion.	6	2222	.505657				
Ru numning unit Set CIR	P at 10 400' above t	, perforație	ns at 1053	47-57	fill Casing	with fluid	test 5-1/2"
Ru pumping unit. Set CIBP at 10,400' above perforations at 10,547-57', fill Casing with fluid, test 5-1/2" casing to 500# for 30 minutes. Record chart.							
casing to 500% for 50 minu			ooA	,			
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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 of closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .							
\sim	₹-	Guidenties	, a general p	o	o (approved pinn
SIGNATURE Has	son P	_TITLE	VP Explo	ration &	Production_	DATE <u>2/1</u>	5/2006
Type or print name		E-mail a	ddress:			Telephon	e No.
For State Use Only OC FIELD REPRESENTATIVE II/STAFF MANAGER							
APPROVED BY: Laun	طاريا الم	_TITI E		. 1 2 / Bio I	O D-CET. MANIMA	ぺぴฅฅ ฅ๕ฑ	E
Conditions of Approval (if any):	<u></u>	<u>-</u> 11166				DAT	MAR 0 9 2006