

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

RECEIVED  
 JAN 09 2018  
 OIL CONSERVATION DIVISION

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		WELL API NO. 30-025-44019
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Kaiser-Francis Oil Company		6. State Oil & Gas Lease No. E-490
3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468		7. Lease Name or Unit Agreement Name Bell Lake Unit South
4. Well Location Unit Letter <u>L</u> : <u>2225</u> feet from the <u>South</u> line and <u>559</u> feet from the <u>West</u> line Section <u>1</u> Township <u>24S</u> Range <u>33E</u> NMPM <u>Lea</u> County		8. Well Number 119H
		9. OGRID Number 12361
		10. Pool name or Wildcat Bell Lake Bone Springs, North
		11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3633' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: Cancel APD <input checked="" type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This is to cancel the APD for this well.

Spud Date:  Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Jan Valkenburg TITLE: Mgr., Regulatory Compliance DATE: 1/9/18

Type or print name: Charlotte Van Valkenburg E-mail address: Charlotv@kfoc.net PHONE: 918-491-4314

APPROVED BY: [Signature] TITLE: Petroleum Engineer DATE: 01/09/18  
 Conditions of Approval (if any):