Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103		
District 1 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			WELL API NO.		
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			30-041-20924 5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 Sout			STATE		E 🔲 🗎
District IV	Santa F	Fe, NM 87	7505	6. State Oil & G	as Lease No	
1220 S. St. Francis Dr., Santa Fe, NM 87505				LH 6324	0000	
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO			7. Lease Name	or Unit Agre	ement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH				Mesa 26 State		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other				8. Well Number 1		
2. Name of Operator GeoSurveys, Inc.				9. OGRID Number 220247		
3. Address of Operator				10. Pool name or Wildcat		
218 South Leggett Drive, Abilene, TX 79605				Wildcat (Montoya)		
4. Well Location Unit Letter L:	1400 feet from the	e South	line and	1100 feet fr	om the Wes	stline
Section 26	Township		ange 29E	NMPM	County I	Roosevelt_
	11. Elevation (Show v	whether DR GL	, RKB, RT, GR, etc.,)		
Pit or Below-grade Tank Application						
Pit typeDepth to Groundw					rface water	
Pit Liner Thickness: mil	Below-Grade Tank: V	/olume	bbls; Co	onstruction Material		
12. Check	Appropriate Box to I	ndicate N	lature of Notice,	Report or Othe	r Data	
NOTICE OF IN	NTENTION TO:		SUB	SEQUENT RE	EPORT C	F:
PERFORM REMEDIAL WORK						
TEMPORARILY ABANDON DULL OR ALTER CASING			COMMENCE DR	· · · · · · · · · · · · · · · · · · ·	P AND A	Ц
PULL OR ALTER CASING	MULTIPLE COMPL	Ļ	CASING/CEMEN	T JOB	•	** **
OTHER: Utilize H2S Equ		X		ation comple		
13. Describe proposed or composed w						
or recompletion. H2S Equipment v	will be utilized	l after	setting surf	ace casing.		
			_	_		
Location and p	its are complete	e, pits	are lined. W	aiting on ri	Lg∙	
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I hereby certify that the information grade tank has been/will be constructed o	a above is true and complete closed according to NMOC	lete to the b	est of my knowledg	ge and belief. I furt	her certify tha	t any pit or below-
SIGNATURE Calvin W.	Omagheu/	TITLE	President	or an (mached) area	DATE_	9-22-06
Type or print name Calvin W.	Donaghey	_		:		
For State Use Only	1,1,0	E-mail address: Telephone No. 325-676-8063 OC FIELD REPRESENTATIVE H/STAFF MANAGES FP 2.6. 2000				
APPROVED BY: Law	Wink	_TITLE_	ELU KEPRESENTA	TIVE H/STAFF A	^ADAFES	EP 2 6 2006
Conditions of Approval (if any):			A golgs . *			