District I	State of New Mexic Energy, Minerals and Natural		Form C-103 May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240		WELL A	PI NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DI	VISION	30-01510120	
District III	1220 South St. Francis		te Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8750		Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			E-9262	
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		BACK TO A	Name or Unit Agreement Name	
PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR S	1401 till 15	enson Queen Unit	
1. Type of Well: Oil Well	Gas Well 🛛 Other		Number 28	
2. Name of Operator	D I	9. OGRI	D Number	
3. Address of Operator	Resources, Inc.	10 Pool	5300 name or Wildcat	
4920 S. Lewis, Suite 107, Tulsa, OK 74105		i	Grayburg	
4. Well Location				
Unit Letter <u>O</u> :	660 feet from the South li	ne and 1920 feet fro	om the <u>East</u> line	
Section 29	Township 18S Ra	inge 30E NMPN	M County Eddy	
	11. Elevation (Show whether DR, RK	B, RT, GR, etc.)		
Pit or Below-grade Tank Application □ or Closure □				
		wall Distance from a		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water  Pit Liner Thickness: mil Below-Grade Tank: Volume bbls: Construction Material				
		bbls; Construction M		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK		EMEDIAL WORK	☐ ALTERING CASING ☐	
TEMPORARILY ABANDON	<u> </u>	OMMENCE DRILLING OP	NS.☐ P AND A ☐	
PULL OR ALTER CASING	MULTIPLE COMPL C	ASING/CEMENT JOB	Ш	
OTHER:		THER:		
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			
of starting any proposed w	ork). SEE RULE 1103. For Multiple C	ompicuous. Attach wente	ore diagram of proposed completion	
of starting any proposed w or recompletion.	ork). SEE RULE 1103. For Multiple C	ompletions. Attach wend	ore diagram of proposed completion	
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.	ean to PBTD. Pump scale converter and	-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed w or recompletion.		-		
of starting any proposed wor recompletion.  Drill out existing plug. Cl	ean to PBTD. Pump scale converter and	l acid. Hang well on produ	action.	
of starting any proposed wor recompletion.  Drill out existing plug. Cl	ean to PBTD. Pump scale converter and	l acid. Hang well on produ	f. I further certify that any nit or below-	
of starting any proposed wor recompletion.  Drill out existing plug. Cl  I hereby certify that the information grade tank has been/will be constructed of	ean to PBTD. Pump scale converter and above is true and complete to the best of closed according to NMOCD guidelines □, a	I acid. Hang well on produ of my knowledge and belie general permit □ or an (attack	f. I further certify that any nit or below-	
of starting any proposed wor recompletion.  Drill out existing plug. Cl	ean to PBTD. Pump scale converter and above is true and complete to the best of closed according to NMOCD guidelines □, a	l acid. Hang well on produ	f. I further certify that any nit or below-	
of starting any proposed wor recompletion.  Drill out existing plug. Cl  I hereby certify that the information grade tank has been/will be constructed of SIGNATURE	above is true and complete to the best or closed according to NMOCD guidelines , a	of my knowledge and beliegeneral permit □ or an (attack	f. I further certify that any pit or below- ned) alternative OCD-approved plan □.	
of starting any proposed wor recompletion.  Drill out existing plug. Cl  I hereby certify that the information grade tank has been/will be constructed of	above is true and complete to the best or closed according to NMOCD guidelines , a	of my knowledge and beliegeneral permit □ or an (attack	f. I further certify that any pit or below- ned) alternative OCD-approved plan □.	
of starting any proposed wor recompletion.  Drill out existing plug. Cl  I hereby certify that the information grade tank has been/will be constructed of SIGNATURE  Type or print name Danny M. Palifor State Use Only	above is true and complete to the best of closed according to NMOCD guidelines , a  TITLE Promer E-mail address: dpalmer@arer	of my knowledge and beliegeneral permit or an (attackduction Supervisor naresourcesing Guye Deputy Field Inspector	f. I further certify that any pit or below- ned) alternative OCD-approved plan  DATE 10-10-06 Telephone No. (505) 738-1739	
of starting any proposed wor recompletion.  Drill out existing plug. Cl  I hereby certify that the information grade tank has been/will be constructed of SIGNATURE  Type or print name Danny M. Palifor State Use Only  APPROVED BY:	above is true and complete to the best or closed according to NMOCD guidelines a TITLE Promer E-mail address: dpalmer@arer	of my knowledge and beliegeneral permit or an (attack eduction Supervisor naresourcesing.com	f. I further certify that any pit or below- ned) alternative OCD-approved plan □.	
of starting any proposed wor recompletion.  Drill out existing plug. Cl  I hereby certify that the information grade tank has been/will be constructed of SIGNATURE  Type or print name Danny M. Palifor State Use Only	above is true and complete to the best of closed according to NMOCD guidelines , a  TITLE Promer E-mail address: dpalmer@arer	of my knowledge and beliegeneral permit or an (attackduction Supervisor naresourcesing Guye Deputy Field Inspector	f. I further certify that any pit or below- ned) alternative OCD-approved plan  DATE 10-10-06 Telephone No. (505) 738-1739	