Submit 3 Copies To Appropriate District Office	State of New Mexico		C-103
District I	Energy, Minerals and Natural Resource	WELL API NO.	27, 2004
1625 N. French De Hobbs, NM 88240 District II		20 025 20186	
1301 W. Gra Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease	
District III 1000 Rio Brezos Rd., 2 c, NM 87410	1220 South St. Francis Dr.	STATE FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NA 8751573 74 75	6. State Oil & Gas Lease No. 35098	
87505	(46' ★ '¥ti\		
OO NOT USE THIS FORM FOR PROPO	TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO A SEPEN OF PLEICH SACK TO A	7. Lease Name or Unit Agreement State "15"	Name
PROPOSALS.)	11 COLIVED	8. Well Number #1	
1. Type of Well: Oil Well	Gas Well Other OCD - ARTESIA	8. Well Number #1	
2. Name of Operator		9. OGRID Number 194266	
Rubicon Oil & Gas, LLC 3. Address of Operator	\$	10. Pool name or Wildcat	
508 West Wall St STE 500	6929200	Tulk Abo North	
4. Well Location			
Unit Letter G: 1650 feet from the North line and 1980 feet from the East line			
Section 15	Township 14S Range	32E NMPM Lea Cou	unty
	11. Elevation (Show whether DR, RKB, RT, G		
	4310' GL		
Pit or Below-grade Tank Application	or Closure	•	
Pit typeDepth to Ground			
Pit Liner Thickness: mi	l Below-Grade Tank: Volume b	bls; Construction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON	CHANGE PLANS COMMENC	E DRILLING OPNS. P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL ☐ CASING/CI	EMENT JOB	
OTHER:	☐ OTHER:		
			ata d data
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.			
9/25/2006 Corrected name on PA marker, corrected section, added API # . – work done to comply with Inspection			
Comments listed on the State letter of non-compliance sent 8/24/2006			
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I hereby certify that the information	above is true and complete to the best of my kno	wledge and belief. I further certify that any pit	or below-
grade tank has been/will be constructed or closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative OCD-approved plan [].			
SIGNATURE XW Maddy TITLE: Regulatory Agent DATE 12/05/2006			
SIGNATURE / Kay M			
For State Use Only	C DISTRICT SI	yahoo.com. Telephone No. 432 638-8475 JPERVISOR/GENERAL MAN JEC 2	4
///	1.0.0	DLC 2 3	<i>2006</i>
APPROVED BY: Mus &	Villan TITLE	DATE	
Conditions of Approval (if any):	•		