Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103
District I	Energy, Minerals and Natural Resources		May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-041-10448	/	
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of	Lease
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		ncis Dr.	STATE	
District IV Santa Fe, NM 87505		7505	6. State Oil & Gas	
1220 S. St. Francis Dr., Santa Fe, NM 87505	1220 S. St. Francis Dr., Santa Fe, NM 87505		303391	
	ICES AND REPORTS ON WELLS	3	7. Lease Name or U	Jnit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		UG BACK TO A		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Morgan Federal "B	,,,
1. Type of Well: Oil Well			8. Well Number 1	
2. Name of Operator		9. OGRID Number 164557 /		
EOR OPERATING COMPANY  3. Address of Operator			10. Dool name of Wildook CAN	
ONE RIVERWAY, SUITE 610, HOUSTON, TE XAS 77056		10. Pool name or Wildcat SAN ANDRES		
4. Well Location				
	feet from the North line and 660	feet from the west	line /	
Section 26	Township 07S Range	33E NMPM	_me CountyRoo	ncevelt
Selection State (VIII)	11. Elevation (Show whether DR)		CountyRoe	Severe
Pit or Below-grade Tank Application C				
Pit typeDepth to Groundw	vaterDistance from nearest fresh w	vater well Distai	nce from nearest surface	: water
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Cons	struction Material	
12. Check A	Appropriate Box to Indicate N	ature of Notice, R	eport or Other D	ata
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				OR FOF: LTERING CASING □
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL		
PULL OR ALTER CASING	_	CASING/CEMENT	<del></del>	
071150	_			
OTHER: OTHER:Conv. From TA to prod.   13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dates.)				
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.	my. SEE ROLL 1103. 101 White	ie completions. 7ttu	on wendore diagram	or proposed completion
CTART DATE 4/4/00				
START DATE: 4/1/08 COMPLE	ETION DATE: 5/31/08			
1.) Repair production facility -	- clean blast coat and replace valve	es and fittings as neces	scary to encure oil et	orage and cales
<ol> <li>Repair production facility – clean, blast, coat and replace valves and fittings as necessary to ensure oil storage and sales.</li> <li>Repair well head, valves, fittings, flowline and gas line to ensure production from the well to the prod. Facility.</li> </ol>				
3.) Repair down hole, rods, tubing, pump and pumping unit to maximize production of oil and gas.				
4.) This lease reactivation is in	accordance with our Inactive Well	Agreed Compliance (	Order for Ridgeway	Arizona Oil Corp.
OGRID 164557.		ASTAIN HERE	De	
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43	regener			
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	OBBS OCE	HOE	BBS OC	
I hereby certify that the information	OBBS OCT	est of my knowledge a	BBS OC	ertify that any pit or below-
I hereby certify that the information grade tank has been/will be constructed or	above is true and complete to the be	est of my knowledge a	BBS OC and belief. I further can (attached) alternative	ertify that any pit or below- /e OCD-approved plan
I hereby certify that the information grade tank has been/will be constructed or SIGNATURE And Charles	above is true and complete to the be	est of my knowledge a	BBS OC and belief. I further can (attached) alternative	ertify that any pit or below- ve OCD-approved plan   OATE 1968
SIGNATURE And Constructed or	above is true and complete to the beclosed according to NMOCD guidelines	est of my knowledge and a general permit of or	BBS OC and belief. I further c an (attached) alternative	ve OCD-approved plan DATE <u>19/68</u>
I hereby certify that the information grade tank has been/will be constructed or SIGNATURE Type or print name  For State Use Only	above is true and complete to the be	est of my knowledge and a general permit of or	BBS OC and belief. I further c an (attached) alternative	ve OCD-approved plan □.
SIGNATURE Type or print name  For State Use Only	above is true and complete to the beclosed according to NMOCD guidelines  TITLE  E-mail add	est of my knowledge and a general permit of or Solders:	BBS OC  and belief. I further c an (attached) alternative  Telep	ohone No.
SIGNATURE Type or print name	above is true and complete to the beclosed according to NMOCD guidelines  TITLE  E-mail add	est of my knowledge and a general permit of or	BBS OC  and belief. I further c an (attached) alternative  Telep	ohone No.