Submit 3 Copies To Appropriate District	State of New Mexico			Form C-10
Office District I	Energy, Minerals and Natural Resources			May 27, 200
1625 N. French Dr., Hobbs, NM 88240				WELL API NO. 3002523898
DISTRICT II 1301 W. Grand Ave., Artesia NADISCO CONSERVATION DIVISION				
1000 Rio Brazos Rd., Aztec, NM 87410				
1220 S. St. Francis Dr., Santa Fe, NIM	19 7010	ŕ		o. State on & das Lease 140.
	CESO REPOR	TS ON WELLS		7 Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROP	DSALS TO DRILL OR TO	DEEPEN OR PL	UG BACK TO A	7. Lease Name of Omit Agreement Name
PROPOSALS.)	CATION FOR PERMIT"	(FORM C-101) Fo	OR SUCH	GRAY SWAY
· · · · · · · · · · · · · · · · · · ·	Gas Well Othe	er Swi		8. Well Number #1
2. Name of Operator	Energy, Minerals and Natural Resources Energy, Minerals and Natural Resources			
3. Address of Operator	JIEARNS, dba	SteAl	ans v	03566 21566V
1625 N. French Dr., Hobbs, NM 88240 District III 1301 W. Grand Ave, Artesia, NM 87410 District IV 1220 South St. Francis Dr. 1000 Rio Bracos Rd, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 87305 SUNDRY NATIONAL PROPOSALS TO DRILL OR TO DIEPERN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Sund PROPOSALS.) 2. Name of Operator 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Operator 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Type of Well: Oil Well Gas Well Other Sund 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (Show whether DR, RKB, RT, GR, et all Depth to Groundwater Distance from nearest fresh water well 1. Elevation (
4. Well Location				WHOM PENN BOUGH
Unit Letter:	660 feet from	the <u>NORT</u>	H line and 3	380 feet from the 687 line
Section 18	Townshi	ip 95 Ra	nge 34 F	NMPM / A County
	11. Elevation (Sho	www.whether DR,	RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application	or Closure	•		
		m negrest fresh w	atar wall Dist	anno faram managari i
n. v.				
Dis, Construction Material				
		o marcate N	ature of Notice, I	Report or Other Data
			SUBS	SEQUENT REPORT OF:
		DON 🔲	REMEDIAL WORK	☐ ALTERING CASING ☐
		Energy, Minerals and Natural Resources May 27, 2004 WELL API NO. 300 25, 3898 STATE FEE STATE FEE 6. State OIL & Gas Lease No. More PRAPMIT' (FORM C-101) FOR SUCH Well Other		
TOTAL ON THE TANK	WOLTIFEE COMP	- [_]	CASING/CEMENT	JOB []
OTHER: Pull tulung - Sque	eze Csq.	[∑}	OTHER:	
13. Describe proposed or comp	leted operations. (Cl	early state all p	ertinent details, and	give pertinent dates, including estimated dat
or recompletion.	ik). SEE RULE 110	3. For Multiple	Completions: Atta	ich wellbore diagram of proposed completion
•	15 4 1	- 44 -	4 '	
			, ,	
lest Csq and squeeze holes, dvill out clean out well				
bore and run new poly coaled taling & pkr.				
\mathcal{L}				
Note - Set fkr Less (han 100				
			, ,,	F3 - 8of -
				tem topicals -
Office 2	4 hours prior to rui	nning MII Te	st & Chart	
I hereby certify that the information a	pove is true and comp	olete to the best	of my knowledge a	nd belief. I further certify that any pit or below-
grade tank has been/will be constructed or c	osed according to NMO	CD guidelines □,	a general permit 🔲 or	an (attached) alternative OCD-approved plan
SIGNATURE (Num	TITLE	ninen	DATE 2/13/57
Time an arisis				DAIL 1/10/10
Type or print name For State Use Only		E-mail addr	ess:	Telephone No.
Tot State Use Only				
APPROVED BY:	mader	_TITLE	STAFF ME	DATE 7-20-10
Conditions of Approval (if any):				~

5.h.