

RECEIVED

DEC 27 2010

HOBBSDUCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

302524383

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

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 PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐7. Lease Name or Unit Agreement Name
STATE 348. Well Number
0012. Name of Operator
ASHER ENTERPRISES9. OGRID Number
1495383. Address of Operator
12808 LORIEN WAY OKLAHOMA CITY, OK 7317010. Pool name or Wildcat
GBJSA

4. Well Location

Unit Letter G : 1980 feet from the N line and 1980 feet from the SE line
Section 34 Township 11S Range 33E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐OTHER: ☐

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.

- WELL**
1. INSTALLED 2 WELL SIGNS, ONE AT ~~2311~~ AND ONE AT BATTERY
 2. REPAIRED LEAK ON BATTERY AND CLEANED LOCATION
 3. TALKED TO RANCHER ABOUT GRASS FIRE AND MADE REPARATIONS TO HIS SATISFACTION

I hereby certify that the information above is true and complete to the best of my knowledge 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

Kelly Jones

TITLE agent

DATE 12-20-10

Type or print name

Kellye Jones

E-mail address: Kellye911@gmail.com

Telephone No. (405) 735-5645

For State Use Only

APPROVED BY:

Mickey Brown

TITLE

Compliance Officer

DATE 12/29/2010

Conditions of Approval (if any):