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## State of New Mexico als and Natural Resources Department

Form C-103

District Office	Lilei,	VIIICIAIS AIRI IV	aurai No	sources Department		•	Kevised 1-1-3	) <b>y</b>
P.O. Box 2088						API NO.		
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210					5. Indi	cate Type of Lease	ATE X F	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410					1	e Oil & Gas Lease N		EE L
					K-2	2519 		777777
SUNDRY NOT ( DO NOT USE THIS FORM FOR PR DIFFERENT RESE (FORM C	OPOSALS SU RIOVE	TO DRILL OR TO	DEEPEN ( FOR PER	OR PLUG BACK TO A	7. Leas	se Name or Unit Agr State A	reement Name	
1. Type of Well: OIL GAS WELL X WELL	·	OTHER						
2. Name of Operator				AP	8. Wel	l No.		
Bison Petroleum Corpo	ration				O Pos	l name or Wildcat		
3. Address of Operator 5809 S. Western Suite	200	Amarillo 1	Pevas	79110-3607	į.	e Permo Per	nn	
4. Well Location					+			
Unit Letter0 :208	BO Feet F	rom The	East	Line and	660	Feet From The	South	Line
Section 5	Town	ship 11S	Ran	ge 34E	NMPM		Lea	County
		10. Elevation (Sho	w whether L	OF, RKB, RT, GR, etc.)		////		
		4201'	••					
			ndicate N	lature of Notice,	· •			
NOTICE OF IN	IENTIC	N IO:		50	BSEQU	IENT REPOI	RI UF:	_
PERFORM REMEDIAL WORK	PLU	G AND ABANDO	N .	REMEDIAL WORK		ALTER	ING CASING	L
TEMPORARILY ABANDON	CHA	NGE PLANS		COMMENCE DRILLI	NG OPNS.	PLUG	AND ABANDON	MENT X
PULL OR ALTER CASING				CASING TEST AND	CEMENT .	OR		
_					02.0.2.0			Г
OTHER:				OTHER:				
<ol> <li>Describe Proposed or Completed Oper work) SEE RULE 1103.</li> </ol>	ations (Clear	rly state all pertinen	it details, and	d give pertinent dates, in	cluding estim	ated date of starting	any proposed	
1. 4-2-92	Set C	IBP @ 9850	' - 35'	Cement				
		s. @ 7400'						
		s. @ 5025' s. @ 4035'						
		s. @ 4035	- tag	3914				
		s. @ 960'	- tag 8	341'			•	
7. 4-9-92	50 sx	s.@ 430'	- tag 3	318'				
		s. @ Surfa	ce					
		ole maker	_					
Circul	ate hol	e @ 9.5 mu	d					
I hereby certify that the information above is tr	ue and comple	te to the best of my kn	owiedge and	belief.				
SIGNATURE	25	alke	тп	<u>F</u> President		DAT	TE 4-23-92	2
TYPEOR PRINT NAME Bruce O.	Barthel	·				TEL	EPHONE NO.	
(This space for State Liee)							4 144 4-	
Jan &	11	- (		on 4 Gas	Maba	_	UN 17 19	93
APPROVED BY	- Pl		тт	£		DA1	E	
CONDITIONS OF APPROVAL, IF ANY:								