

Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 South St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural ResourcesForm C-103  
Revised March 25, 1999

## OIL CONSERVATION DIVISION

1220 South St. Francis Drive  
Santa Fe, NM 87505

WELL API NO. 30-025-35300	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. K-4807	
7. Lease Name or Unit Agreement Name: STATE 31	
8. Well No. 5	
9. Pool name or Wildcat BAUM UPPER PENN	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator AMERICAN INLAND RESOURCES COMPANY, LLC.	
3. Address of Operator P.O. BOX 50938; MIDLAND, TX 79710	
4. Well Location Unit Letter <u>M</u> : <u>660</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>West</u> line Section <u>31</u> Township <u>13-S</u> Range <u>33-E</u> NMPM County <u>Lea</u>	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4285 GR	

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

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

## SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>	

12. 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.

08/01/01 TD 7-7/8" hole @ 10300' @ 7:15 am. TOH/LD drill collars. Circ. hole. RU & RIH w/235  
 jts. 5-1/2", 17#, J-55/N-80 csg. Set @ 10300'. RU BJ & cmt w/500 sx 15:61:11 Poz "C" + .2% CD-32  
 Bumped plug, 7:15 am 8/02/01. RD BJ. ND BOP set slips.  
 WOC.

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

SIGNATURE Michael D. Prichard TITLE Operations Engineer DATE 08/02/01Type or print name Michael D. Prichard Telephone No. (915)685-0981

(This space for State use)

APPROVED BY: \_\_\_\_\_ TITLE Paul Kautz DATE 08/07/2001  
 Conditions of approval, if any: \_\_\_\_\_  
for