

State of New Mexico
Energy, Minerals and Natural Resources

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	

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 ☐

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 M : 660 feet from the South line and 660 feet from the West line
Section 31 Township 13-S Range 33-E NMPM County Lea

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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input 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 recompilation.

07/08/01 TD 12-1/4" hole @ 4097' @ 12:25 pm. TOH/LD drill collars. Circ. hole. RU & RIH w/91 jts. 8-5/8", 32# csg. Set @ 4097'. RU BJ & cmt w/1300 sx 35:65 Poz + 6% gel + 5% salt + 1/4# CF. Tail w/200 sx 'C' + 1% CaCl2. Circ. 189 sx to pit. Bumped plug, 2:15 am. RD BJ. 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 07/11/01

Type or print name Michael D. Prichard Telephone No. (915)685-0981
(This space for State use)

APPROVED BY: Paul Kautz TITLE Geologist DATE JUL 17 2001
Conditions of approval, if any:

JUL 18 2001