

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

WELL API NO. 30-025-35937
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> <i>P</i>
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.)		7. Lease Name or Unit Agreement Name:  Burrus
1. Type of Well Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	2. Name of Operator Ricks Exploration, Inc.	8. Well No. 6
3. Address of Operator 210 Park Ave, Ste 3000, Oklahoma City, OK 73102	9. Pool name or Wildcat Trinity; Wolfcamp	
4. Well Location  Unit Letter <u>N</u> : <u>330'</u> feet from the <u>South</u> line and <u>2310'</u> feet from the <u>West</u> line  Section <u>22</u> Township <u>12S</u> Range <u>38E</u> NMPM County <u>Lea</u>		
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3801' GL, 3819' KB, 3818' DF		

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 type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Set Intermediate Casing <input checked="" 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.

7/22/02- Drill 11" hole to 4516'. Ran 8 5/8" 32# J55 8rd casing & set at 4505'. Cement casing w/lead- 800 sxs 50:50:10 Poz gel + 3% salt, .1 PPSC/F, & tailed w/250 sxs C + 3% salt. Circ cmt to surf. WOC.

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

SIGNATURE Dora Bustamante TITLE Production Analyst DATE 8/28/02

Type or print name Dora Bustamante

Telephone No. (915) 683-7443

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of approval, if any:

ORIGINAL SIGNED BY  
GARY W. WINK  
OC FIELD REPRESENTATIVE II/STAFF MANAGER

SEP 03 2002