

Submit 3 Copies To Appropriate District
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
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-34263
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Bonneville Fuels Corporation		6. State Oil & Gas Lease No. VA 1914-1
3. Address of Operator 1660 Lincoln Street Suite 2200 Denver, CO 80264		7. Lease Name or Unit Agreement Name: Salbar 16 State #1
4. Well Location Unit Letter <u>E</u> <u>2456'</u> feet from the <u>North</u> line and <u>1023</u> feet from the <u>West</u> line Section <u>16</u> Township <u>16S</u> Range <u>36E</u> NMPM LEA County		8. Well No. #1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3918' GR		9. Pool name or Wildcat Northeast Shoe Bar Strawn

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 recompilation.

1/26/00 TD 12,730: RU and ran 287 jts 5 1/2" 17# (3213' S-95, 3797' N-80 & 5633' L-80) LT&C casing, landed @ 12,730'. Cmt 1st stage w/80 sx Interfil "H" + 2% kcl & 600 sx 50:50 Pozmix 'A' /Cl-H + 2% gel + 2% KCL + .6% Halad-90 & 5#/sx micro bond. Circ 80 sx (42 bbls) lead cmt to pit
Pump 20 BW spacer. Cmt 2nd stage w/510 sx Interfill "H" cmt w/2% KCL, followed by 250 sx 50:50 Pozmix "H" cmt w/ 2% KCL & 2% gel. Drop plug & displace, bump plug, float OK. ND BOPE. Set slips & cut off casing. Rig released 12 AM 1/27/2000. WOCU.

2/23/00 Drill out cmt, test DV tool & csg to 1500# for 10 min. Drill cmt & FC to 12,647'

2/24/00 RIH, ran CBL 3040' -12,634, top of cement @ 3250'.

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

SIGNATURE Robert A. Schwering TITLE Operations Engineer DATE 1/24/2000

Type or print name

Robert A. Schwering

Telephone No. 303 863-1555 ext 213

(This space for State use)

APPROVED BY

ORIGINAL COPIES BY CHRIS WILLIAMS

DATE MAR 20 2000

Conditions of approval, if any: