Fax Transmittal Memo 7672 | No. of Pages #4 | Today's Date 12/2/96 | Time

To BUDDY HILL | From JOSEPH J. KELLY

Company OCD | Company ELK OIL COMPANY

Location | Location ROSWELL, NM | Dept/ Charge

Fax # (505) 393-0720 | Telephone # | Fax # (505) 623-5001 | Telephone # (505) 623-3180

Comments | Original Disposition: ☐ Destroy ☐ Return ☐ Call for pickup

GENTLEMEN:
AS PER YOUR REQUESTED - PLEASE FIND REQUESTED INFO ON THE STATE IA #1 WELL. THANK YOU.

Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30-025-26898

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. LG-1085

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: State IA

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator: ELK OIL COMPANY

8. Well No. 1

3. Address of Operator: Post Office Box 310, Roswell, New Mexico 88202-0310

9. Pool name or Wildcat: Airstrip Bone Springs

4. Well Location
Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section 36 Township 18 South Range 34 East NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3974.6' GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	[X]	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER:			☐

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.

SEE ATTACHED REPORT.

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

SIGNATURE _____ TITLE President DATE 12/02/96

TYPE OR PRINT NAME Joseph J. Kelly TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE DEC 03 1996

CONDITIONS OF APPROVAL, IF ANY: