Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-8

District Office	-1016)/ Inmerals and I tu	iaiai resources Dep	artificiti	Revised 1-1-89
	DIL CONSERVAT			
P.O. Box 1980, Hobbs NM 88241-1980 DISTRICT II	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-025-28987	
P.O. Drawer DD, Artesia, NM 88210	Sulta 10, 1411 0/303		5. Indicate Type of Le	ease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lea	
SUNDRY NOTICES AND REPORTS ON WELLS				
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			A 7. Lease Name or Unit Agreement Name R.F. FORT	
1. Type of Well: OIL GAS WELL WELL	OTHER			
2. Name of Operator TRIUMPH EXPLORATION			8. Well No.	
3. Address of Operator P. O. BOX 10280, MIDLAND, TEXAS 79702			9. Pool name or Wildcat	
4. Well Location	Feet From The FSL	Line and 33	Feet From Th	ne WEST Line
Section 24	Township 175	Range 38 E	NMPM	LEA County
		ether DF, RKB, RT, GR, et		County
11. Check App	ropriate Box to Indica	ate Nature of Not	ice. Report, or C)ther Data
NOTICE OF INTE		į.	SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	REMEDIAL WORK	Пал	ERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING		JG AND ABANDONMENT
PULL OR ALTER CASING	0.0000000000000000000000000000000000000	CASING TEST AND CI		IG AND ABANDONMENT
OTHER:	П		EMENT JOB	Г
12. Describe Proposed or Completed Operation CER PULL F 1103	ationsClearly state all pertinent	details and give pertinent	dates including action	ated data of station
work) SEE RULE 1103.	successfully state an perunent	acums, and give permient	uates, meruang estina	ned date of starting any propo
9-13-01 C.I.B.P. @ 12,072 N 9-14-01 SPOT 25 SKS 9000-89	900	11,831		
SPOT 25 SKS 6000-59 SPOT 25 SKS 5035 W				
9-17-01 SPOT 25 SKS 4992 TA				
9-18-01 CUT 5 1/2 @ 2565 LA				
SPOT 35 SKS 2600 W. 9-19-01 SPOT 35 SKS 2560 TA		10 00 00 00 00 00 00 00 00 00 00 00 00 0	SSION MUST BE NO	OTIFIED 24
SPOT 35 SKS 2265-21		1000 (OR TO THE BEGIN	INING OF
SPOT 40 SKS 475 TAC		TO BE APPRO	DVED.	THE C-103
SPOT 20 SKS 60-SURF INSTALL P&A MARKER CIRC 9.5				
I hereby certify that the information above is true	and complete to the best of my know	wledge and belief.		
SIGNATURE		mle OWNER		DATE 09/28/2001
TYPE OR PRINT NAME OF F KESTER			TELEF	PHONE NO. 915/547-2926
(This space for State Use)			120	
				DOT 4 2001
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	T	TITLE)ATE