Submit 3 Copies To Appropriate State of New Mexico Form C-103 District Office Energy, Minerals and Natural Resources Revised March 25, 1999 DISTRICT I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 DISTRICT II OIL CONSERVATION DIVISION 30-025-35094 811 South First, Artesia NM 88210 2040 South Pacheco Indicate Type of Lease **DISTRICT III** STATE FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 S. Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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) Type of Well: Toro "22" Oil Well Gas Well Other 2. Name of Operator 8. Well No. 2 Louis Dreyfus Natural Gas Corporation 3. Address of Operator 14000 Quail Springs Parkway, Suite 600 9. Pool name or Wildcat Klein ba Oklahoma City, OK 73134 Southeast Scharb (Wolfcamp) 4. Well Location Unit letter N : 390 feet from the South line and 1980 \_ feet from the \_\_\_ West Section 22 Township 19S Range NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3740 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 **ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING **MULTIPLE** CASING TEST AND CEMENT JOB COMPLETION 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. 7-24-00 well spudded. 7-26-00 ran 13 3/8" 48# csg, set @ 626'. Cemented lead w/300 sks 35/65 Poz/C, tail w/180 sks "C" + 2% S1. Bumped plug, float held. Circulated 168 sks to reserve pit. 18 hrs wait on cement, then commenced drilling. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE ( Regulatory Technician DATE 7/28/00 Type or print name Carla Christian Telephone No. (405) 749-5263

TITLE

ALMATE 4 2000

(This space for State use)

Conditions of approval, if any:

APPROVED BY

