Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office OIL CONSERVATION DIVISION LISTRICT I WELL API NO. P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St. 30-025-34704 DISTRICT II Santa Fe, NM 87505 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE 🗌 DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Hat Mesa "32" State i. Type of Well: OIL X GAS WELL OTHER 8. Well No. 2. Name of Operator Bass Enterprises Production Co. 9. Pool name or Wildcat 3. Address of Operator P.O. Box 2760 Midland, TX 79702-2760 Hat Mesa (Delaware) 4. Well Location 660' 660' Feet From The North Line and Feet From The Line Unit Letter Lea Township Range County Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3605' GL Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: ALTERING CASING PLUG AND ABANDON REMEDIAL WORK PERFORM REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: Surface Casing 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. Drilled 11" hole to 3200' 11/14/99. Ran 73 joints 8-5/8" 28#, WC-50 LTC to 3200'. Cemented with 430 sacks 50/50 Poz C with additives. Tail with 200 sacks Class C with additives. Circulated 50 sacks to surface. WOC 21.5 hours. Drill cement, test casing to 1000 psi, OK 11/16/99. I hereby certify that the information above is true and complete to the best of my knowledge and belief. THILE Production Clerk DATE SIGNATURE TYPE OR PRINT NAME Tami Wilber TELEPHONE NO. (This space for State Use) GARY WINK APPROVED BY

