State of New Mexico
En, nerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO.
30-025-34144

5. Indicate Type of Lease
STATE ☒   FEE ☐

6. State Oil & Gas Lease No.
E-1673

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 33

1. Type of Well:
OIL WELL ☐   GAS WELL ☒   OTHER

2. Name of Operator
RAND PAULSON OIL COMPANY, INC.

8. Well No. 2

3. Address of Operator
508 W. WALL, STE 100 MIDLAND, TX 79701

9. Pool name or Wildcat
GRAMA RIDGE

4. Well Location
Unit Letter F : 1980 Feet From The NORTH Line and 2310 Feet From The WEST Line

Section 33   Township 21-S   Range 35-E   NMPM   LEA   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3621' 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 ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: _____ ☐		OTHER: TD HOLE & RUN 4½" LINER ☒	

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.

11-11-97 DRILLED 6⅛" OH TO 12,667'. LOGGED WELL. RAN 1934' OF 4½" 11.6#
P-110 LINER (12,666'-10,731'). CEMENTED W/220 SX CLASS H + ADDITIVES.
WOC. CLEANED OUT TOP OF LINER AND INSIDE 4½" LINER TO 10,620'.
RELEASED RIG 11-15-97.

PREP TO MI SERVICE UNIT, RUN TUBING AND PERFORATE
W/ EOB METHOD.

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

SIGNATURE _____   TITLE AGENT   DATE 11-18-97

TYPE OR PRINT NAME O.H. ROUTH   TELEPHONE NO. 915 687-0323

(This space for State Use)
ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

JAN 05 1998

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: