Submit 3 Copies to Appropriate District Office

CONITIONS OF APPROVAL. IF ANY

State of New Mexico nerals and Natural Resources Department Energy

Form C 103

Revised 1-1-89

	OIL CONCEDA ATION DIVISION				
DISTRICT I	OIL CONSERVATION DIVISION		WELL API NO.		
P.O. Box 1980, Hobbs. NM S8240	P O Ro	P.O. Box 2088		000 00004	
Santa Fe. New Mexico 87504-2088			30-025-09384		
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE		
DISTRICT T11 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas L	ease No.	
SUNDRY NOT (DO NOT USE THIS FORM FOR PRO DIFFERENT RESE (FORM C	7. Lease Name or Unit Agreement Name				
1. Type of Well:					ĺ
Oil Gas Well X	OTHER	State A A/C 1			
2. Name of Operator Raptor Reso	urces. Inc.	8. Well No. 94			
3. Address of Operator			9. Pool name or Wildcat		
901 Rio Grande, Austin, TX 7	'8701		Jalmat Tansill Ya	ites 7 Rvrs (Pr	o Gas) 79240
4. Well Location 660	Feet From The No	rth Line and I	980 Feet From T	ne We	st Line
Unit Letter C	Feet From the	Brite and			
Section 22		Range 36E		Lea	County
<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	////// 10. Elevauon (Show w.	hether DF, RKB. RT, GR, ctc.)		<u> </u>	(//////////////////////////////////////
	Appropriate Box to Indic				
NOTICE OF IN	TENTION TO:	SU	BSEQUENT RE	PORT OF:	•
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	A	LTERING CASI	NG
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLII	NG OPNS. P	LUG AND ABA	NDONMENT
PULL OR ALTER CASING		CASING TEST AND	<u></u>		
OTHER:					
12. Describe Proposed or Completed O work/SEE RULE 1103.	perations (Clearly state all pertinent	details, and give pertinent dates,	including estimated date of	starting any propo	osed
WOIN, SEE ROLE 1103.					
Raptor Resources plans to add per	fs and refrac this well as follo	OWS:			
1. Drill out CIBP at 3350'.					
2. Set new CIBP at 3560' +/	C. C 2001 A- 2560				
3. Add additional Yates/7 Rvrs4. Refrac the existing and the n					
5. Return well to production	ew peris.				
•					
This work is currently planed for	late December or early next	year.			
(This replaces the Intent dated 9-	[9-01)				
12. I hereby certify that the information above is	true and complete to the best of my knowle				
SIGNATURE JANK	inkly_	R egulatory	Agent for Raptor	DATE	10-5-01
TYPE OR PRINT NAME Bill R. Keathly,	Regulatory Agent			TELEPHONE NO	915-697-1609
					70.70
(this space for State Use)					
APPROVED BY		TITLE		DATE	<u> </u>