## State of New Mexico

Form C-103 Submit 3 Copies Energy, minerals and Natural Resources Department Revised 1-1-89 to Appropriate District Office DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-24335 DISTRICT II Santa Fe. New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE FEE [ DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. E - 5896 - 1SUNDRY 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.) 1. Type of Well: WELL X WELL. Bell Lake Unit OTHER 2. Name of Operator 8. Well No. Kaiser-Francis Oil Company 12 3. Address of Operator 9. Pool name or Wildcat P. O. Box 21468, Tulsa, OK 74121-1468 Bell Lake (Cherry Canyon/Bone 4. Well Location Springs) 1980 J : 1980 Feet From The South East Unit Letter \_\_\_ Feet From The Line and Line 31 **23S** Lea Township **NMPM** County Section Range 10. Elevation (Show whether DF, RKB, RT, GR, etc.) n/a Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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: Commingled Cherry Canyon & Bone OTHER: Springs formations 2. 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. TOOH w/rods, tbg & pump. 1. MIRU WSU. TIH w/mill shoe, bulldog bailer & tbg. RU power swivel & drilled out cmt & CIBP @ 8661'. CIBP came free & pushed to bottom. 4. TOOH w/tbg & bailer. (Commingled Cherry Canyon & Bone Springs formations). TIH w/tbg, pump & rods. Tubing set @ 8839'. 5. Pump tested @ 2 BO, 70 BW, 350 MCF.. Operations began 10/30/99

Operations completed 11/8/99 First sales began 11/25/99

I hereby certify that the information above is true and complete SKINATURE	the to the best of my knowledge and belief. $\frac{T}{TTLE} = \frac{T}{T}$	echnical Coordinator	DATE 4/26/00
TYPE OR PRINT NAME Charlotte Van Va	alkenburg O	918-491-4314	TELEPHONE NO.
(Thus space for State Use)	X.W.	1.0	
APPROVED BY	mre		DATE