

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals 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. | 30-025-25302 |
| 5. Indicate Type of Lease | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. | E-5096 |
| 7. Lease Name or Unit Agreement Name | |
| Bell Lake Unit | |
| 8. Well No. | 18 |
| 9. Pool name or Wildcat | |
| Bell Lake Morrow, S. (Gas) | |

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.)

| | | |
|--|---|---|
| 1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | 2. Name of Operator Kaiser-Francis Oil Company | 3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468 |
| 4. Well Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>36</u> Township <u>23S</u> Range <u>33E</u> NMPM Lea County | | |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) n/a | | |

| | | | |
|---|---|---|--|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | | | |
| NOTICE OF INTENTION TO: | SUBSEQUENT REPORT OF: | | |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER: <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER: <input checked="" type="checkbox"/> MIT |

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.

11/5/02

Ran MIT on 7 5/8" casing & 5" liner from surface to CIBP @ 13665'. Pressured casing to 520# with less than 1/2 bbl water and recorded pressure on chart (attached) for 35 minutes. No leak off. Test was witnessed and chart signed by E. L. Gonzales.

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

SIGNATURE Charlotte Van Valkenburg TITLE Technical Coordinator DATE 11/12/02
TYPE OR PRINT NAME Charlotte Van Valkenburg 918-491-4314 TELEPHONE NO.

(This space for State Use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL SIGNED BY
GARY W. WINK
OC FIELD REPRESENTATIVE

NOV 21 2002
DATE