

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-103  
Revised 1-1-89

DISTRICT I

P.C. Box 1980, Hobbs, NM 88240

DISTRICT II

P.C. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells) <b>30-025-33321</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>14926</b>
7. Lease Name or Unit Agreement Name <b>SALTMOUNT</b>
8. Well No. <b>4</b>
9. Pool name or Wildcat <b>TEAGUE BLINEBRY</b>
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input checked="" type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator <b>Arch Petroleum, Inc.</b>	
3. Address of Operator <b>10 Desta Dr., Suite 420E, Midland, TX 79705</b>	
4. Well Location Unit Letter <b>O</b> <b>990</b> Feet From The <b>SOUTH</b> Line and <b>2310</b> Feet From The <b>EAST</b> Line Section <b>21</b> Township <b>23S</b> Range <b>37E</b> NMPM <b>LEA</b> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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

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.

PLEASE EXTEND OUR APPLICATION TO DRILL THE ABOVE WELL 1 YEAR TO MARCH 12, 1998.

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

SIGNATURE Bobbie Brooks TITLE Production Analyst DATE: 3/3/97  
TYPE OR PRINT NAME Bobbie Brooks TELEPHONE NO. (915)685-1961

ORIGINAL SIGNED BY JERRY SEXTON  
APPROVED BY DAVID R. SUPERVISOR TITLE   
CONDITIONS OF APPROVAL, IF ANY:

DATE MAR 05 1997

Expires 3/12/98