

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103.  
Revised March 25, 1999

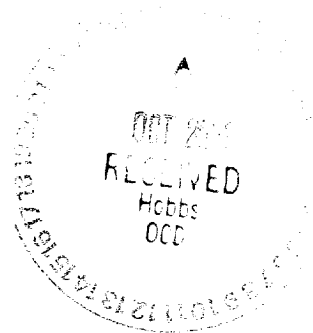
OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		<b>WELL API NO.</b> <u>30-025-11183</u>
<b>1. Type of Well:</b> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		<b>5. Indicate Type of Lease</b> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
<b>2. Name of Operator</b> <u>PRONGHORN Mgt. Corp.</u>		<b>6. State Oil &amp; Gas Lease No.</b>
<b>3. Address of Operator</b> <u>P.O. Box 1772 Hobbs, N.M. 88241</u>		<b>7. Lease Name or Unit Agreement Name:</b> <u>J. F. Black</u>
<b>4. Well Location</b> Unit Letter <u>F</u> : <u>1980</u> feet from the <u>N</u> line and <u>1980</u> feet from the <u>W</u> line Section <u>21</u> Township <u>24S</u> Range <u>37E</u> NMPM <u>Lea</u> County		<b>8. Well No.</b> <u>4</u>
<b>10. Elevation (Show whether DR, RKB, RT, GR, etc.)</b> <u>3234 (DF)</u>		<b>9. Pool name or Wildcat</b> <u>Jalmit - T - Y - SR</u>

<b>11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</b>	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input checked="" 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"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

1. Move in AND Rig up.
2. Install production equipment.
3. Return well to production.
4. Evaluate, if uneconomical will file to p+4 well or convert to injection.



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

SIGNATURE Guy A. Baber TITLE Partner DATE 10/24/01

Type or print name Guy A. Baber  
(This space for State use)

Telephone No. 505-393-8386

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

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