

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
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

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

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.)		WELL API NO. 30-025-26335
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> RKB <input type="checkbox"/> Fed <input type="checkbox"/>
2. Name of Operator American Inland Resources Company, LLC		6. State Oil & Gas Lease No. NM 23019
3. Address of Operator P.O. Box 50938; Midland, TX 79710		7. Lease Name or Unit Agreement Name: Federal
4. Well Location Unit Letter <u>E</u> : <u>2210</u> feet from the <u>North</u> line and <u>890</u> feet from the <u>West</u> line Section <u>21</u> Township <u>25-S</u> Range <u>37-E</u> NMPM County <u>Lea</u>		8. Well No. <u>1</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3065 GR</u>		9. Pool name or Wildcat Jalmat (Tan-Yts-7Rvrs)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <u>Add perfs in the Yates</u> <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

Recomplete well in the Yates. Set RBP at 3200'.
 Add perfs 2859-62, 2891-94, 2914-17, 2952-55, 2983-86, 3005-08,
 3024-27, 3055-58, 3086-89 (1 spf, 36 holes)
 Frac down tubing w/50000 gal gel + 75000# sand.
 Work to be accomplished by 7-15-2000.

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

SIGNATURE Michael D. Prichard TITLE Operations Engineer DATE 7-7-2000

Type or print name Michael D. Prichard Telephone No. 915-685-0981
 (This space for State use)

APPROVED BY _____ TITLE _____ DATE _____
 Conditions of approval, if any:

