

Submit 3 Copies
to Appropriate
District Office

DISTRICT I

P.O. Box 1980, Hobbs, NM 88241-1980

DISTRICT II

111 S. First Street, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Mineral and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, New Mexico 87505

WELL API NO.

30-025-34332

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

V-2512

7. Lease Name or Unit Agreement Name

Shell State

8. Well No.

#6

9. Pool Name or Wildcat

Red Tank Delaware West

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 ☐ GAS ☐
WELL ☒ WELL ☐ OTHER ☐

2. Name of Operator

STRATA PRODUCTION COMPANY

3. Address of Operator

P.O. BOX 1030, ROSWELL, NEW MEXICO 88202-1030

4. Well Location

Unit Letter E : 1980 Feet From The North Line and 990 Feet From The West Line

Section 36 Township 22 South Range 32 East NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3750' GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: Extension ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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

An Application for Permit to Drill was filed March 2, 1998 and approved March 4, 1998.
The one year approval period for commencement of operations will expire March 4, 1999.

Strata Production Company requests approval to extend the Application for Permit to Drill
approval period one year to March 4, 2000.

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

SIGNATURE Carol J. Garcia TITLE PRODUCTION RECORDS MANAGER DATE 2/22/99

TYPE OR PRINT NAME CAROL J. GARCIA TELEPHONE NO. 505-622-1127

(This space for State Use)

APPROVED BY DAVID WILLIAMS TITLE MANAGER DATE 2/22/99

CONDITIONS OF APPROVAL, IF ANY: