

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-015-40712
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Puckett North
8. Well Number #16
9. OGRID Number 025111
10. Pool name or Wildcat Maljamar/Grayburg/San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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 ☒ Gas Well ☐ Other ☐

2. Name of Operator  
Hudson Oil Company of Texas

3. Address of Operator  
616 Texas Street, *Ft. Worth, TX*

4. Well Location  
Unit Letter H : 1980 feet from the North line and 660 feet from the East line  
Section 13 Township 17S Range 31E NMPM Eddy County, NM

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

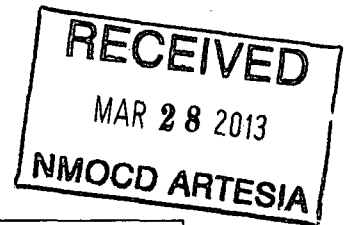
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10/8/12 Ran 8.625" 24# J-55 STC 8 RD Csg to 820'

10/8/12 Cement Csg with 200 SX Premium Plus 4% and 250 SX Premium Plus 2%, circ 112 SX to surface

10/8/12 Test csg to 1000 PSI for 30 minutes, test OK.



Spud Date: 10/8/12

Rig Release Date: 10/14/12

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

SIGNATURE E. Randall Hudson III TITLE President DATE March 26, 2013

Type or print name E. Randall Hudson III E-mail address: rhudson@hudsonoil.com PHONE: (817) 336-7109

For State Use Only

APPROVED BY: T. C. Shumard TITLE Booklist DATE 3/28/2013  
Conditions of Approval (if any):