

**RECEIVED**

APR 22 2013

INMOOD ARTESIA

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-015-41019

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name  
MALOOF STATE

8. Well Number 001

9. OGRID Number

274841

10. Pool name or Wildcat

Red Lake: Queen-Grayburg-San Andres

## 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 ALAMO PERMIAN RESOURCES LLC

3. Address of Operator 415 W. WALL ST., SUITE 500 MIDLAND, TX 79701

## 4. Well Location

Unit Letter I: 1695 feet from the S line and 800 feet from the E line

Section 28

Township 17S

Range 28E

NMPM

County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3685 GR

## 12. 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 ☐ MULTIPLE COMPL. ☐DOWNHOLE COMMINGLE ☐OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: ☒ PERFORATIONS/TUBING

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.

## PERFORATIONS

DATE	TOP	BOTTOM	OPEN HOLE	SHOTS/FT	SHOT SIZE	MATERIAL	STIMULATION	AMOUNT
03/18/13	2709	3057	N	2	19	15%NEFE; CO2 Foam Frac	Acid; Frac	2,000 gal; 67,784 lbs prop
03/21/13	2361	2663	N	2	19	15% NEFE; CO2 Foam Frac	Acid; Frac	3,000 gal; 77,916 lbs prop

## TUBING

TUBING SIZE	TYPE	DEPTH SET	PACKER SET
2.875	J55	2748'	

## Pressure Test Data

02/14/13 Test BOP &amp; Surface Casing to 1500 psi for 30 mins, Ok.

03/16/13 Pressure up on Production casing to 3000 psi for 30 mins, Ok

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

SIGNATURE Carie Stoker TITLE Regulatory Affairs Coordinator DATE 04/03/2013Type or print name Carie Stoker E-mail address: cstoker@helmsol.com PHONE: 432 664 7659

## For State Use Only

APPROVED BY: B Wade TITLE Dist. H Supervisor DATE 4/24/2013

Conditions of Approval (if any):