Submit 3 Copies To Appropriate District Office	State of New Mexico		APR 2 0 2009	Form C-103 June 19, 2008
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	June 19, 2008
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV	1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease STATE X E 6. State Oil & Gas Lease	TEE
1220 S St. Francis Dr., 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.)  1. Type of Well: Oil Well X Gas Well  Other			7. Lease Name or Unit Agreement Name  Milepost  8. Well Number 1	
Type of Well: Oil Well X Gas Well    Other      Name of Operator			9. OGRID Number	
MOREXCO, INC			15262	
3. Address of Operator P O. Box 51208, Midland, TX 79710			10 Pool name or Wildcat Milepost, Morrow	
4. Well Location				
Unit Letter A : 660 feet from the North line and 660 feet from the East line				
Section 36 Township 26S Range 25E NMPM Eddy County  11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	3609° GR	A, AAD, K1, GA, etc.		
	PLUG AND ABANDON CHANGE PLANS  MULTIPLE COMPL  deted operations. (Clearly state all rk). SEE RULE 1103. For Multiple gged 2 <sup>nd</sup> plug @ 340'. ag @ 1797', drilled out to 4653'. plug @ 4738', 5 <sup>th</sup> plug @ 5013', plug @ 7257', drilled to 7 <sup>th</sup> plug @	REMEDIAL WOR COMMENCE DR CASING/CEMEN  OTHER: Repertinent details, an ple Completions: A drilled through to 53 @ 9905', tested casi	entry digive pertinent dates, inclustrach wellbore diagram of program of program to 500#, held.	X ding estimated date roposed completion to 500#, held.
Prep for production testing.				
Spud Date:	Rig Release I			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE	TITLE	_Regulatory Agent_	DATE	4-2-09
Type or print nameAnn E. Ritchie E-mail address:ann.wtor@gmail.com PHONE: _432 684-6381				
For State Use Only				
APPROVED BY:  Conditions of Approval (if any):	i Koever TITLE G	realogist	DATE	<i>1121109</i>