Office	State of New Mexico	JUL 22 2009 Form C-103
District I	Energy, Minerals and Natural Resources	WELL API NO. June 19, 2008
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONGERNATION DURIGION	30-015-35678
1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE 🔀 FEE 🗌
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
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		7. Lease Name or Unit Agreement Name STATE 2
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other		8. Well Number 001
2. Name of Operator		9. OGRID Number
REEF EXPLORATION, L.P.		246083
3. Address of Operator		10. Pool name or Wildcat
1901 N. CENTRAL EXPWY, SUITE 300 RICHARDSON, TEXAS 75080		LIVINGSTON RIDGE; DELAWARE, SE
4. Well Location		
Unit Letter G: 1980 feet from	om the N line and 1980 feet from the E lin	le l
Section 2 Township 23S Range 31E NMPM EDDY County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3430 GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB DOWNHOLE COMMINGLE COMPL CASING/CEMENT JOB		
OTHER:	OTHER:	
		and give pertinent dates, including estimated date Attach wellbore diagram of proposed completion
THE STATUL WILL BE GRANTED AFFER A SUCCESSFUL MUT TEST. NOTIFY OCO 48 HOMES BEFORE TEST RUP SO IT MAY BE WITNESSED. PT RESERT TO RULES 19.15.25.12 -14		
Spud Date: <u>07/25/2007</u>	Rig Release Date:	08/14/2007
I hereby certify that the information about	ve is true and complete to the best of my knowledge.	edge and belief.
		,
SIGNATURE	TITLE DECLIEATORY ARE	AIDS DATE 7/2/109
SIGNATURE	TITLE REGULATORY AFF	TIND DATE ([21]
Type or print name <u>JOSE L. VELEZ</u> E-mail address: <u>JOSEV@REEFOGC.COM</u> PHONE: <u>972-437-6792</u> For State Use Only		
	MAS TITLE COMPUSANS ()	FALER DATE 7/31/09