Submit 3 Copies To Appropriate District State of New Mexico Office State of New Mexico	Form C-103 /M
Office District I 1625 N. French Dr., Hobbs, NM 88240 REFEREN, Minerals and Natural Resources	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OCOL CONSERVATION DIVISION	30-023-20014 5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S St Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	Big Hatchet North Unit 14 State
1. Type of Well: Oil Well Gas Well X Other	8. Well Number 001
2. Name of Operator Dan A. Hughes Company, L. P.	9. OGRID Number 251054
3. Address of Operator	10. Pool name or Wildcat
P.O. Drawer 669, 208 E. Houston St., Beeville, TX 78104-0669	Wildcat, Percha Shale
4. Well Location	
Unit Letter : 1545.11 feet from the North line and 2025.39 feet from the East line Section 14 Township 30S Range 17W NMPM County HidAlgo	
Section 14 Township 30S Range 17W 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County HidAlgo
4440.72¹ GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. P AND A CASING/CEMENT JOB CASING/CEM	
DOWNHOLE COMMINGLE	100В 🔲
OTHER: OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
10/13/2009 Well Shut-in for 19 days. Tidwell drove to location & cable tooled from 16' to 18'	
,,,,,,,	
	
Spud Date: 5/29/2009 Rig Release Date:	
<u></u>	
I hereby certify that the information above is true and complete to the best of my knowledge	e and belief
Thereby certify that the information above is true and complete to the best of my knowledg	e and belief.
SIGNATURE TITLE Operations Man	DATE 10/20/2000
TILE Operations Man	ager DATE 10/20/2009
Type or print name <u>Jeffery R. Ilseng</u> E-mail address: <u>jeffi@dahugl</u> For State Use Only	nes.net PHONE: 361/358-3752
FOI State Use Offly	
APPROVED BY: high TITLE realogies	DATE_10/38/3007
Conditions of Approval (if any):	