

Submit 1 Copy To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 October 13, 2009

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

WELL API NO. 30-015-00446
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LC 048491A
7. Lease Name or Unit Agreement Name Saunders A
8. Well Number 9
9. OGRID Number 261198
10. Pool name or Wildcat Empire; Yates-Seven Rivers
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
Doral Energy Corp.

3. Address of Operator
415 W. Wall Street, Suite 500, Midland, TX 79701

4. Well Location
 Unit Letter **H** : **2310** feet from the **North** line and **330** feet from the **East** line
 Section **13** Township **17S** Range **27E** NMPM **Eddy** County

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

RECEIVED
 SEP 08 2010
 NMOCD ARTESIA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input 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.

**Well shut in and secured for further study
 Waiting geological review**

Spud Date: 12/07/1955 Rig Release Date: 02/??/1956

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

SIGNATURE *Joanne Keating* TITLE Regulatory Affairs Coordinator DATE 09/07/2010

Type or print name Joanne Keating E-mail address: jkeating@alamoresources.com PHONE: 432.897.0673
For State Use Only

APPROVED BY: Accepted for record TITLE _____ DATE 9-9-10
 Conditions of Approval (if any): NMOCD *DJS* *OSK*