

Submit 3 Copies 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  
June 19, 2008

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

WELL API NO. 30-031-20441
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SFRR(A)
8. Well Number 090
9. OGRID Number
10. Pool name or Wildcat South Hospah-Lower Sand

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  
Nacogdoches Oil & Gas Inc.

3. Address of Operator  
816 North Street Nacogdoches, TX 75961

4. Well Location  
Unit Letter P : 1000 feet from the S line and 330 feet from the E line  
Section 1 Township 17N Range 9W NMPM County Mckinley

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
6930' GR : 6943' KB

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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion  
or recompletion.

Well returned to production on November 18, 2011

RCVD DEC 1'11

OIL CONS. DIV.

DIST. 3

Spud Date:

Rig Release Date:

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

SIGNATURE Terry Hughes TITLE Operations Manager DATE 11-18-11

Type or print name Terry Hughes E-mail address: terry.hughes@nogtx.com PHONE: 214-245-5799

For State Use Only

APPROVED BY: ACCEPTED FOR RECORD TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): W