

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

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| 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | | WELL API NO. 30-031-20451 |
| 2. Name of Operator NACOGDOCHES OIL AND GAS, INC. | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 3. Address of Operator P.O. BOX 632418, NACOGDOCHES, TX 75963 | | 6. State Oil & Gas Lease No. 306173 |
| 4. Well Location Unit Letter <u>E</u> : <u>1440</u> feet from the <u>FNL</u> line and <u>420</u> feet from the <u>FWL</u> line Section <u>7</u> Township <u>17N</u> Range <u>8w</u> NMPM County <u>McKINLEY</u> | | 7. Lease Name or Unit Agreement Name SANTA FE RAILROD |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6947' GR | | 8. Well Number 40 |
| 9. OGRID Number 256689 | | 10. Pool name or Wildcat HOSPAH LOWER SAND, SOUTH |

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

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|---|--|---|--|
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/> | | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: SWABBING <input checked="" type="checkbox"/> | |
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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.

Swabbed subject well on 6-25-09 and received 8 gallons of oil with 3 pulls at 360'.



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 Michael Dehnisch TITLE VP of Operations DATE 7/28/29

Type or print name Michael Dehnisch E-mail address: mike.dehnisch@nogtx.com PHONE: 936-560-4747

For State Use Only

APPROVED BY: Kelly G. Powell TITLE Deputy Oil & Gas Inspector, District #3 DATE AUG 03 2009

Conditions of Approval (if any):