Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
Office Energy, Minerals and Natural Resou	Irces Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District 11</u> – (575) 748-1283 811 S. First St. Artesia NM 88210 OIL CONSERVATION DIVISI	30.025.41096
BIL S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 HOBBS OCD South St. Francis Dr.	5. Indicate Type of Lease
District $N = (505) 476-3460$ Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM MAY <b>1 3 2013</b> 87505	VO 8263
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK T DIFFERENT RESERVOIR. USE "APPLICATION TOR BERMIT" (FORM C-101) FOR SUCH	Gateway 2 State
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well D Other	8. Well Number #2
2. Name of Operator	9. OGRID Number
Caza Operating, LLC /	249099 <b>(</b> 10. Pool name or Wildcat
200 N. Loraine, Suite 1550, Midland, Tx 797	
4. Well Location	
Unit Letter <u>D</u> : 525 feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line Section 2 Township 19 S Range 35 E NMPM County Lea	
Section 2 Township 19 S Range 3 11. Elevation (Show whether DR, RKB, RT	
3849 GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
—	IAL WORK  ALTERING CASING  INCE DRILLING OPNS  P AND A
PULL OR ALTER CASINGMULTIPLE COMPLCASING/CEMENT JOB	
	Continue Drilling operation.
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.	
5-8-2013_Start up Baccus Rig 6 Cable tool equipment. Drill 18" hole from 27 ft to 37' (10') new hole.	
No water in well bore. Secure well. Depart location. Days since spud (9 days).	
Spud Date: 4-30-2013 Rig Release Date:	· · · · · · · · · · · · · · · · · · ·
I hereby certify that the information above is true and complete to the best of my l	knowledge and belief.
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SIGNATURE THANK A CHART TITLE Operations Manager DATE 5-9-2013	
Type or print name Richard L. Wright E-mail address: <u>wright@cazapetro.com</u> PHONE: <u>432 682 7424</u>	
For State Use Only	
APPROVED BY:	
Conditions of Approval (if any):	
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