Submit I Copy To Appropriate District	State of New Mexico	Form C-103 Revised August 1, 2011
District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 HOB3S OCD		WELL API NO.
511 5, F1151 5L, /MIC513, INIVE 00210	DIL CONSERVATION DIVISIO	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	201220 South St. Francis Dr. Santa Fe, NM 87505	STATE 🔲 FEE 🛛
<u>District IV</u> – (505) 476-3460 (220 S. St. Francis Dr., Santa Fe, NM 87505 <b>RECEIN</b>	·	6. State Oil & Gas Lease No. 309574
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		8. Well Number 096
2. Name of Operator Resaca Operating Company		9. OGRID Number 263848
3. Address of Operator		10. Pool name or Wildcat
1331 Lamar Street, Suite 1450 Houston, TX 77010		Langlie Mattix: 7Rivers-Queen-Grayburg
4. Well Location Unit Letter N : 140	feet from the South line and	2600 feet from the West line
Unit Letter <u>N</u> : 140 Section 32	Township 24S Range	37E NMPM Lea County
	evation (Show whether DR, RKB, RT, C	
	3246' GL	
12. Check Approp NOTICE OF INTENT	riate Box to Indicate Nature of N	otice, Report or Other Data
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR		
		CE DRILLING OPNS.
	IPLE COMPL	EMENT JOB
OTHER: Extend TA Status of We		<u> </u>
<ol> <li>Describe proposed or completed op of starting any proposed work). SE proposed completion or recompletic</li> </ol>	E RULE 19.15.7.14 NMAC. For Multi	ills, and give pertinent dates, including estimated date ole Completions: Attach wellbore diagram of
Resaca Operating Company respec	tfully requests an extension of TA statu	s for this well for a period of 1 year.
		······································
Spud Date:	Rig Release Date:	
L <mark></mark>		
I hereby certify that the information above is	true and complete to the best of my kno	wiedge and belief.
Mil K		
SIGNATURE ////	TITLE Engineer Ass	<u>istant</u> DATE <u>6/05/2013</u>
Type or print name <u>Melanic Reyes</u>	E-mail address: melanie.reves@re	sacaexploitation.com PHONE: (432) 580-8500
For State Use Only		
APPROVED BY:	TITLE DIST. M	BZ DATES-12-2013
Conditions of Approval (il app):	www.mis.	
		JUN 0 6 2013