

HOBBS OCD

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 87416  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

MAY 26 2011

RECEIVED

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

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.)		WELL API NO. 30-025-39908
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator SIANA OPERATING LLC		6. State Oil & Gas Lease No.
3. Address of Operator P.O. BOX 10303, MIDLAND, TX 79702		7. Lease Name or Unit Agreement Name CURRY STATE
4. Well Location Unit Letter <u>E</u> : 1980 feet from the <u>N</u> line and <u>990</u> feet from the <u>W</u> line Section <u>22</u> Township <u>23S</u> Range <u>34E</u> NMPM LEA County		8. Well Number <u>005</u> 9. OGRID Number <u>168687</u> 10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3452 GR		

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

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> 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: <input type="checkbox"/>		OTHER: AMEND SPUD DATE <input checked="" 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.

\* SPUD WELL: 5/24/2011  
SPUD WELL @ 8:00 A.M.

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 Paula McMillan TITLE Manager DATE 5/26/2011

Type or print name Paula McMillan E-mail address: pmmcillan@sianoil.com PHONE: 432/687-6600

For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE MAY 26 2011  
Conditions of Approval (if any):