Submit I Copy To Appropriate District Office	State of New N		Form C	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Na	atural Resources	Revised July 18 WELL API NO.	3, 2013
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONCEDUATION DIVISION		30 009 20024	
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE X	
<u>District IV</u> (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Pe, INW	67303	6. State Oil & Gas Lease No.	
SUNDRY NOT	ICES AND REPORTS ON WEL		7. Lease Name or Unit Agreement N	ame
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI			Moberly Trust	
PROPOSALS.)	/	HOBBS OCD	8. Well Number 2	
	Gas Well Other			
2. Name of Operator / CurryTex, LLC	· <b>/</b>	APR 1 1 2014	9. OGRID Number 294149	
3. Address of Operator	•		10. Pool name or Wildcat Wildcat	
10,000 N. Central Expressway, Da	allas, Tx 75231	RECEIVED		
4. Well Location				
Unit Letter:	990 feet from theE	line and16	feet from theSlin	e
Section 23	Township 5N	Range 32E	NMPM County Curry	
	11. Elevation (Show whether L 4632 GR	OR, RKB, RT, GR, etc		
12 Check	Appropriate Box to Indicate	Nature of Notice	Report or Other Data	
	• •		•	
	NTENTION TO:		BSEQUENT REPORT OF:	<u>~</u> П
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORTEMPORARILY ABANDON CHANGE PLANS COMMENCE DR				ЗЦ
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN		
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM	. п	OTUED.	•	
OTHER:  13 Describe proposed or comm	nleted operations (Clearly state a	OTHER:	nd give pertinent dates, including estimat	ed date
of starting any proposed we proposed completion or rec	ork). SEE RULE 19.15.7.14 NM	AC. For Multiple Co	ompletions: Attach wellbore diagram of	
• • •	•		•	
			with 51 sx Class C cement. A dry hole m	arker
Was installed and the location clean	ed. The well is ready for inspecti	on.		
Sand Date: July 19, 20	014	- Au	igust 10, 2014	
Spud Date:	Rig Release	Date:	8	
I hereby certify that the information	above is true and complete to the	best of my knowled	ge and belief.	
	mm, 5		D. ITT	,
SIGNATURE	TITLE	Consultant	DATE4/10/2014	
Type or print namePhelps W	hite E-mail address:	pwiv@ziaent.co	m PHONE:575 626 7660	)
For State Use Only	()	1		
APPROVED BY. Wall	Title Li	Ohypliamo 1	Officer DATE 4/22/10	4
Conditions of Approval (if any):	HILE	1	DATE	/
· · · · · · · · · · · · · · · · · · ·			APR 2 3 2014	
			Arn	/. 