

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
 May 27, 2004

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. <u>30-025-12123</u>
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 type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <u>ENOURA ENERGY LLC</u>		6. State Oil & Gas Lease No. <u>30712</u>
3. Address of Operator <u>P.O. Box 1637 162405, N.M. 88240</u>		7. Lease Name or Unit Agreement Name <u>EDITH BUTLER</u>
4. Well Location Unit Letter <u>F</u> : <u>1980</u> feet from the <u>FNL</u> line and <u>1980</u> feet from the <u>FNL</u> line Section <u>18</u> Township <u>22-S</u> Range <u>38-E</u> NMPM County <u>LEA</u>		8. Well Number <u>#5</u> 9. OGRID Number <u>215879</u> 10. Pool name or Wildcat <u>Padlock/Brumley/Brumley/Brumley/Brumley/Brumley</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3953 DF</u>		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls Construction Material _____		

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

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"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

WELL WAS RE-COMPLETED IN BLIND RAY ZONE. C-103 WAS SUBMITTED & APPROVED 4-6-2005. TESTING OF ZONE INVOLVED WAS PERFORMED AND NEW C-116 IS BEING SUBMITTED ALONG WITH ~~C-103~~ C-103.
 COMMINGLING WILL NOT REDUCE THE VALUE OF THE OIL OR GAS.
 ALL WORKING INTEREST AND ROYALTY INTEREST ARE THE SAME.
 ALL PER LAND.
 C-116 ATTACHED WITH ALLOCATION OF ZONES.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

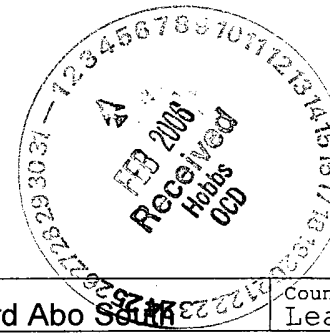
SIGNATURE Eric Vega TITLE MANAGER DATE 2-2-2006

Type or print name _____ E-mail address: _____ Telephone No. _____

APPROVED BY: Chris Williams TITLE Dist. Supervisor DATE 2/2/06
 Conditions of Approval (if any): _____

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State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
2040 South Pacheco
Santa Fe, NM 87505



Form C-116
Revised March 17, 1999

Submit 2 copies
To Appropriate
District Office

GAS - OIL RATIO TEST

Operator Endura Energy LLC				Pool Paddock/ Brunson Drinkard Abo				County Lea								
Address P.O. Box 1637 Hobbs, N.M. 88240				TYPE OF TEST - (X)				Scheduled <input type="checkbox"/>		Completion <input type="checkbox"/>		Special <input checked="" type="checkbox"/>				
LEASE NAME	WELL NO.	LOCATION				DATE OF TEST	STATUS	CHOKE SIZE	TBG. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST				GAS - OIL RATIO CU.FT/BBL.
		U	S	T	R							WATER BBLs.	GRAV. OIL	OIL BBLs.	GAS M.C.F.	
049210 Paddock 021579 Edith Butler 5F 18-22S-38E 30-025-12123	5	P	18	22	38	1-26-2006					24			8	110	1375
												Oil zones Involve				
												Paddock	10%	1	Bbls	
												Blinebry	80%	6	Bbls	
												Drinkard	10%	1	Bbls	
													100%	8	Bbls	

Instructions:

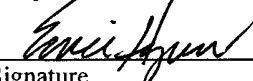
During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 301, Rule 1116 & appropriate pool rules.)

I hereby certify that the above information is true and complete to the best of my knowledge and belief.


Signature

Ernie L. Hegwer Manager
Printed Name and Title
02-02-2006 505-393-6327