

District I
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Phone:(575) 393-6161 Fax:(575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720

District III
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Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural
Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
August 1, 2011

Permit 160378

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 NUMBER 30-025-40686
1. Type of Well: O		5. Indicate Type of Lease P
2. Name of Operator MOREXCO INC		6. State Oil & Gas Lease No.
3. Address of Operator P. O. BOX 51208, MIDLAND, TX 79710		7. Lease Name or Unit Agreement Name OSO NEGRO
4. Well Location Unit Letter C : 660 feet from the N line and 1980 feet from the W line Section 13 Township 18S Range 38E NMPM Lea County		8. Well Number 001
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3629 GR		9. OGRID Number 15262
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 OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: Drilling/Cement <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
Spud: 12/13/2012
Drilling 12 1/4" hole.
12/17/12: Ran 8 5/8", 24#, J-55 casing to 1995'. Cemented with 520 sx lead C 4% gel + 2% CaCl2 + 1/4# celloflake, mixed @ 13.5 ppg w/1.74 yld, tailed w/200 sx C1 C 2% CaCl2 mixed @ 14.8 ppg w/1.34 yld, 15 centralizers. Circulated 65 sx to half pit, bumped plug down. Tested to 2000 psi, held, WOC 18 hrs. NU BOP tested to 1500 psig, held fine. Cleaned pits, start back in hole.
12/25/12: TD @ 5100', logged well.
12/27/12: Ran 5 1/2" 17# J-55 casing to 5100', cemented with 700 sx C 50/50 POZ, 10% gel, 5% salt, 1/4# celloflake w/3/10% CDF2, tailed with 2012/13/2012 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
12/17/12	Surf	FreshWater	12.25	8.625	24	J-55	0	1995	720	1.34	C		1500	0	N
12/27/12	Prod	FreshWater	7.875	5.5	17	J-55	0	5100	900	1.34	C		1500	0	N

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 Electronically Signed **TITLE Manager** DATE **2/12/2013**
Type or print name **Rhonda Becker** E-mail address **morexco@earthlink.net** Telephone No. **505-627-1290**

For State Use Only:
APPROVED BY: **Paul Kautz** TITLE **Geologist** DATE **2/13/2013 9:17:13 AM**