Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	June 19, 2008 WELL API NO.
District II	OIL CONSERVATION DIVISION	30-023-20015
1301 W. Grand Ave , Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		, '
SUNDRY NOT	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	Hueco South Unit 29 State
1. Type of Well: Oil Well	Gas Well X Other	8. Well Number 001
2. Name of Operator Dan A.	Hughes Company, L. P.	9. OGRID Number 251054
3. Address of Operator		10. Pool name or Wildcat
P. O. Drawer 669, 208	E. Houston St., Beeville, TX 78104-0	Percha Shale
4. Well Location Unit Letter : 2330 feet from the North line and 660 feet from the East line		
Unit Letter	: 2330 feet from the North line and Township 33S Range 16W	660 feet from the East line NMPM County Hidalgo
Section 23	11. Elevation (Show whether DR, RKB, RT, GR, e	
	4658' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
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PERFORM REMEDIAL WORK		JBSEQUENT REPORT OF: ORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE	DRILLING OPNS. 🔀 P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE		ENT JOB .
DOWNHOLE COMMINGLE		
OTHER:	OTHER:	and give portinent dates, including estimated date
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.		
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7/16/2011 Well shutin for 19 days. Tidwell drove to location. Drilled from 80' to 82'		
N.		
		DECEIVED
`		RECEIVED
		JUL 25 2011
		NMOCD ARTESIA
	4	INVIOCE ARTESIA
Spud Date: 5/28/200	9 Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE SIGNATURE	TITLE Operations Ma	nager DATE 7/22/2011
Type or print name	R. Iseng E-mail address: jeffi@dah	ughes.net PHONE: 361/358-3752
Accepted BY: Double	(). 5 al \ 6 al al	7 20 11
APPROVED BY: Conditions of Approval (if any):	May TITLE Field Supervi	DATE 7-28-11