

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

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. 30-015-10461
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 Alamo Permian Resources, LLC		6. State Oil & Gas Lease No. STATE 647
3. Address of Operator 415 W. Wall Street, Suite 500, Midland, TX 79701		7. Lease Name or Unit Agreement Name STATE 647
4. Well Location Unit Letter A : 330 feet from the N line and 330 feet from the E line Section 36 Township 17S Range 28E NMPM County EDDY		8. Well Number 202
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 274841
		10. Pool name or Wildcat Artesia: Queen-Grayburg-San Andres

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	RETURN TO PRODUCTION

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.

9/13/2012

NO SHUT IN WELL PRESSURE. RU TESTERS. TEST 79 JTS OF TUBING IN THE HOLE TO 5000 PSI. OK. RD TESTERS. PU PUMP AND RIH WITH RODS. HWO. GOOD ACTION.

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 Thomas Fulvi TITLE Regulatory Affairs Coordinator DATE 09/14/2012

Type or print name THOMAS FULVI E-mail address: tfulvi@alamoresources.com PHONE: 432.897.0673

APPROVED BY: [Signature] TITLE Deputy Supervisor DATE 10/09/12

Conditions of Approval (if any):

