Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
1625 N French Dr , Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION	30-015-28676
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Saina 1 0, 1111 075 05	309949
(DO NOT USE THIS FORM FOR PROPO	CICES AND REPORTS ON WELLS DISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Dow "B" 28 Federal
PROPOSALS) 1. Type of Well: Oil Well	ICATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Other SWD	8. Well Number
2. Name of Operator	ah Oil, LLC	9. OGRID Number 245872
3. Address of Operator		10. Pool name or Wildcat
	Box 568, Artesia, NM 88211-0568	Cedar Lake
4. Well Location		
Unit Letter P Section 28	township 17S Range 31E	1227 feet from the East line NMPM County Eddy
Section 28	11. Elevation (Show whether DR, RKB, RT, GR, etc.	
Lievation (Show metho: 21t, 1d.2), 1xt, 5xt, 5xt,		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF II PERFORM REMEDIAL WORK		SSEQUENT REPORT OF: RK
TEMPORARILY ABANDON		
PULL OR ALTER CASING	MULTIPLE COMPL	IT JOB □
DOWNHOLE COMMINGLE		
OTHER:	☐ OTHER:	Begin Injection
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.		
Please be advised that we began injection on 10/22/12. Injection Rate is 9973 bpd, with tubing pressure @ 1490 lbs.		
injection Rate is 9973 opa, with tubing pressure (a) 1490 lbs.		
		RECEIVED
		OCT 2 9 2012
		NMOCD ARTESIA
		Miles
<u> </u>		
Spud Date:	Rig Release Date:	
<u> </u>		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE AANA KL	My TITLE Office Assistant	DATE 10/24/12
Type or print name Dana King E-mail address: dking@judahoil.com PHONE: 575-746-1280		
For State Use Only		
APPROVED BY: Kutter IVE TITLE CONFLICTOR DATE 11/8/12—Conditions of Approval (if any):		