

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
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
Revised May 08, 2003

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

WELL API NO. 30-015-34541
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	7. Lease Name or Unit Agreement Name: 1625 STATE
2. Name of Operator LCX Energy, LLC	8. Well Number 191
3. Address of Operator 110 N. Marienfeld, Ste. 200, Midland, TX 79701	9. OGRID Number 218885
4. Well Location Unit Letter <u>0</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>1880</u> feet from the <u>EAST</u> line Section <u>19</u> Township <u>16S</u> Range <u>25E</u> NMPM County <u>EDDY</u>	10. Pool name or Wildcat COTTONWOOD CREEK -WOLFCAMP
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3584' GR	

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 COMPLETION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: CONTINUED <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.

12/4/06 - 12/13/06 DRILL LATERAL FROM 5179' TO 8647' TD. RUN 5 1/2" CASING, RUN 5 1/2" FS, 1 JT 5 1/2" 17# P110 BUT CASING, 5 1/2" FC 104 JTS 5 1/2" 17# P110 BUT, 1 JT X-OVER, 88 JTS 5 1/2" 17# N80 LT&C, TOTAL 8650', SET CASING AT 8647'. RAN 20 CENTRALIZERS. CEMENTED W 1170 SX 50/50 POZ+10%D20+0.175 PPS D130+0.2%D46+10%D44+0.3% D112 MIXED AT 12.9#/G & 2.01 CU FT/SK, FOLLOWED BY 360 SX PVL+100%D151+2%D174+2%D112+0.6%D65+2% S1 MIXED AT 13#/G. DISPLACE CEMENT, BUMP PLUG TO 1850#, RELEASE PRESSURE, FLOATS HELD OK. WOC, HANG CASING OFF, ND BOPS, NU WELLHEAD. RELEASE RIG. WO FRAC.

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

SIGNATURE Kanicia Carrillo TITLE Regulatory Agent DATE 12/19/06

Type or print name KANICIA CARRILLO

Telephone No. 432-262-4013

(This space for State use)

FOR RECORDS ONLY

DEC 27 2006

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any: