

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 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
 May 27, 2004

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

WELL API NO. 30-015-35341
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Karlsbad Corral SWD
8. Well Number 1
9. OGRID Number 148111
10. Pool name or Wildcat SWD: Delaware

Month - Year
 FEB 13 2007
 OCD - ARTESIA, NM

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 Gas Well Other

2. Name of Operator
 SOUTHWESTERN ENERGY PRODUCTION COMPANY

3. Address of Operator
 2350 N. SAM HOUSTON PARKWAY, EAST, HOUSTON, TX 77032

4. Well Location
 Unit Letter J : 2222 feet from the South line and 2640 feet from the East line
 Section 11 Township 25S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3093' GL

Pit or Below-grade Tank Application or Closure

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:		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 checked="" type="checkbox"/>	
OTHER: RECOMPLETE <input type="checkbox"/>		OTHER: TD WELL <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. (see attached).**

TD @ 800 hrs on 02/08/2007. Drilled 7-7/8 hole to 4000', ran 88 jts of 5-1/2" N-80, 17 ppf production casing to 3992'. Cemented 5-1/2 casing: Lead 610 sxs Class "C" @ 12.4 ppg (Yield 2.1) - Tail 410 sxs Class "C" @ 14.2 ppg (Yield 1.3). Tested casing to 1000 psi. Okay. Tested tubing head to 2500 psi. Okay. Release rig @ 1100 hrs 02/09/2007.

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 Martha C. Howard TITLE Staff Reg. Analyst DATE 2-12-2007

Type or print name Martha C. Howard E-mail address: martha-howard@swn.com Telephone No. 281-618-4887

FOR RECORDS ONLY
 APPROVED BY: _____ TITLE _____ DATE FEB 14 2007

Conditions of Approval (if any):