

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

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

Form C-103  
Feb 7, 2007

WELL API NO.	30-015-27670
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
State Oil & Gas Lease No.	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		7. Lease Name or Unit Agreement Name <b>EAST SHUGART UNIT</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other - <b>Injection well</b>		8. Well Number # <b>042</b>
2. Name of Operator <b>Americo Energy Resources, LLC</b>		9. OGRID Number <b>228051</b>
3. Address of Operator <b>7575 San Felipe, Suite 200, Houston, TX 77063</b>		10. Pool name or Wildcat <b>Shugart (Y-SR-Q-G)</b>
4. Well Location Unit Letter <b>A</b> : <b>330</b> feet from the <b>North</b> line and <b>1140</b> feet from the <b>East</b> line Section <b>34</b> Township <b>18 South</b> Range <b>31 East</b> NMPM <b>Eddy</b> County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>2628.5 GL</b>		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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 checked="" 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"/>	
OTHER: <input type="checkbox"/>		OTHER: <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 re-completion.

- Informed "OCD" 505-748-1283 EXT 102
- 5/18/07-MIRU up slick line unit, sound and cleared open perforations using sinker bars.
- 5/21/07MIRU Crain acid company. Pressure up & hold 500 psi in tbg/casing annulus.
- Install steel line to tubing string. Pumped 1000 gal 15% HCL acid & displace with 2%kel water.
- Closed well in. rig down acid equipment. Waited on acid 30 minutes.
- Open well to injection. Pressure dropped from 1600 psi to 1410 psi. Put well on injection.

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 Robert M. Gray TITLE Land Manager DATE May 29, 2007

Type or print name Robert M. Gray E-mail address: don.gray@americoenergy.com Telephone No. 713-984-9700

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any): \_\_\_\_\_