

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. 30-015-35029
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 Renate 16 State Com
8. Well Number #1
9. OGRID Number 212226
10. Pool name or Wildcat Chester

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 <input type="checkbox"/> <b>19 2007</b>	
2. Name of Operator Corkran Energy, LLC <b>OCD-ARTESIA</b>	
3. Address of Operator 300 Beardsley Lane, C-204 Austin, TX 78746	
4. Well Location Unit Letter A: 660 feet from the North line and 910 feet from the East line Section A Township 23S Range 24E NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4065'	
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 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: <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 recompletion.

Surface Casing Set:

Run 17 jts. 13 3/8 J-55 ST&C 54.50# csg. (Texas Pattern shoe, 1 jt., float collar & 16 jts) Casing set depth 697'.  
Cement 1<sup>st</sup> Lead: 180 sx class H + 10% A10 + 10# LCM + 1% CaCl + .25# celloflake, (wt.14.6, yield 1.52) slurry 49 bbl.  
2<sup>nd</sup> Lead: 400 sx 35/65/Poz C + 6% gel + 2% CaCl + .125# celloflake, (wt. 12.7, yield 1.87) slurry 133 bbls.  
Tail: 200 sx class C + 2% CaCl + .125# celloflake (wt. 14.8, yield 1.35) slurry 48 bbls. Displace with 101 bbls.Fresh water.  
Bumped plug with 746 PSI.  
Circulated 250 sx to reserve pit  
Plug did not hold, shut in & WOC 24 hrs.  
Tested casing to 1000 PSI for 30 minutes.  
Reduced hole size to 12 1/4" and resumed drilling

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 Angela Lightner TITLE Consultant DATE 7-17-2007

Type or print name AngelaLightner E-mail address: angela@rkford.com Telephone No. 432-682-0440

**For State Use Only**

APPROVED BY: Accepted for record - NMOCD TITLE \_\_\_\_\_ DATE 7/20/07  
Conditions of Approval (if any):