

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
 June 19, 2008

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

WELL API NO. 30-005-63538
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA-2101
7. Lease Name or Unit Agreement Name Miller State
8. Well Number 1
9. OGRID Number 001092
10. Pool name or Wildcat Undesignated
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3929 GR

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
Armstrong Energy Corporation

3. Address of Operator
P.O. Box 1973, Roswell, NM 88202-1973

4. Well Location
 Unit Letter N : 1200 feet from the SOUTH line and 1980 feet from the WEST line
 Section 2 Township 8 SOUTH Range 27 EAST NMPM CHAVES County

NOV 25 2008
 OCD-ARTESIA

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"/>	
DOWNHOLE COMMINGLE <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 recompletion.

Cleanup with 500 gal 15% HCL; 1/2 gal NE 116; 2.5 gal FE. Flush w/ 30 bbls water. Loaded tubing w/ 23 bbls. 1 BPM 800-1400 PSI. TO 1050 PSI @ 1.2 BPM. ISIP @ 600 PSI. 1 min on vacuum. SI 8:00 a.m. 40 BL TR.

ACCEPTED FOR RECORD

DEC 1 - 2008

Gerry Guye, Deputy Field Inspector
 NMOCD-District II ARTESIA

Spud Date:

Rig Release Date:

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

SIGNATURE B. Stubbs TITLE Vice President - Operations DATE 11-24-08

Type or print name Bruce A. Stubbs E-mail address: bastubbs@zianet.com PHONE: (505) 625-2222

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____