

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  
May 27, 2004

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

WELL API NO. 30-015-03262
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-5524
7. Lease Name or Unit Agreement Name: WLHU GRB 4 SD UNIT TRACT 31 (aka STATE 1 OR WLH GB SAND 001)
8. Well Number 001
9. OGRID Number 143199
10. Pool name or Wildcat LOCO HILLS (ON.-GB.-S.A.)

Pit or Below-grade Tank Application ☐ or Closure ☒  
Pit type STEEL 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 \* NONE WITHIN 1,000'

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK OR FOR SUCH 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  
ENERVEST OPERATING, L.L.C. ATTN: BRIDGET HELFRICH

3. Address of Operator  
1001 FANNIN ST., SUITE 800, HOUSTON, TEXAS 77002

4. Well Location  
Unit Letter M: 330 feet from the SOUTH line and 990 feet from the WEST line  
Section 02 Township 18S Range 29E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.) \_\_\_\_\_

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
	CASING TEST AND CEMENT JOB <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.

12/10-21/09: RE-ENTER PLUGGED WELL X DRILL OUT CMT. PLUGS X WELLBORE TO 1,466' (T.D. OK'D BY D. GRAY-OC).  
12/22/09: MIX X PUMP A 50 SX. CMT. PLUG @ 1,466'; WOC X TAG TOP OF CMT. PLUG @ 780' (TAG OK'D BY D. GRAY W/ OGD; CIRC. WELL W/ PXA MUD).  
12/23/09: MIX X PUMP A 50 SX. CMT. PLUG @ 780'-380' (CALC.); PERF. SQZ. HOLES IN 8-1/4" CSG. @ 150' X MIX X CIRC. TO SURFACE A 190 SX. CMT. PLUG @ 150'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

WELL PLUGGED X ABANDONED 12/23/09.

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 NM OGD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE David A. Eyer TITLE AGENT DATE 12/26/09  
E-mail address: deyler@milagro-res.com  
Type or print name DAVID A. EYER Telephone No. (432) 687-3033

For State Use Only

APPROVED BY [Signature] TITLE \_\_\_\_\_  
Conditions of Approval, if any: \_\_\_\_\_

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms. [www.emnrd.state.nm.us/ocd](http://www.emnrd.state.nm.us/ocd).

DATE 12/31/09