

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
October 13, 2009

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

WELL API NO. 30-015-27949
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name EAST SHUGART UNIT
8. Well Number 56
9. OGRID Number
10. Pool name or Wildcat

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
AMERICO ENERGY RESOURCES, LLC

3. Address of Operator
7575 SAN FELIPE ST. STE 200 HOUSTON, TX 77063

4. Well Location
Unit Letter **H** : **2250** feet from the **NORTH** line and **1910** feet from the **EAST** line
Section **35** Township **18S** Range **31E** 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 checked="" 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"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
OTHER: <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

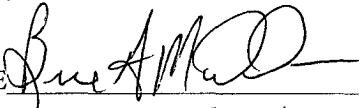
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/1/2010 - Tbing between well head & MASTER Tbing Valve split, we contained the PRODUCED water that was blowing out to pit's & HAULING to DISPOSALS.
3/4/2010 - MIRUWOR, SPEARED Tbing, UNSET PKR, POH w/Tbing & PACKER REPAIR PACKER, RIH w/Packer & Tbing testing tbing to 5000 PSI, set packer N/D Bop, N/u well head.
3/8/2010 R/u Pump trk RAN MIT, RDWOR

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  TITLE FOREMAN DATE 3/18/2010
Type or print name BRUCE G. MADDEN E-mail address: brucemadden49@MSN.COM PHONE: 832-613-3809
For State Use Only

APPROVED BY:  TITLE COMPLIANCE OFFICER DATE 4/20/10
Conditions of Approval (if any):