Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resour	rces Revised August 1, 2011 WELL API NO.
1625 N. French Dr , Hobbs, NM 88240 District II – (575) 748-1283	OH CONGEDUATION DIVIGIO	20.042.21117
811 S First St, Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISIO	5. Indicate Type of Lease
1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No. LG3925
SUNDRY NOTI (DO NOT USE THIS FORM FOR PROPOS	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement Name Lybrook H36-2307
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR SUCH	8. Well Number
1. Type of Well: Oil Well	Gas Well  Other	01H
2. Name of Operator	-	9. OGRID Number
Encana Oil & Gas (USA) Inc.  3. Address of Operator		282327 10. Pool name or Wildcat
370 17 <sup>th</sup> Street, Suite 1700 Den	ver, CO 80202	Lybrook Gallup
4. Well Location		
SHL: Unit Letter: H	1550 feet from the NORTH line	e and 280 feet from the EAST line
BHL: Unit Letter: <u>E</u>	•	e and 330 feet from the WEST line
Sec		MPM Sandoval County
	11. Elevation (Show whether DR, RKB, RT,	GR, etc.)
	7265' Ground	
12 Check A	Appropriate Box to Indicate Nature of I	Notice Report or Other Data
NOTICE OF IN		SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON		AL WORK ☐ ALTERING CASING ☐ NCE DRILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING		/CEMENT JOB
DOWNHOLE COMMINGLE	indexiii 22 doiiii 2	·
OTHER:		
		etails, and give pertinent dates, including estimated date
of starting any proposed we proposed completion or rec		ltiple Completions: Attach wellbore diagram of
proposed completion of rec	ompiction.	
	e design for this well and determined that cond	ductor is not required. Encana requests approval to omit
the conductor from this well.		
		RCVD DEC 2'11
		OIL CONS. DIV.
		DIST. 3
Spud Date:	Rig Release Date:	
Spud Date.	Rig Release Date.	
I hereby certify that the information	above is true and, complete to the best of my k	nowledge and belief.
D IT	$\mathcal{D}_{\mathcal{A}}$	
SIGNATURE SUMPLE	HTLE: Regulatory Advis	sor DATE: 12/01/11
TYPE OR PRINT NAME: Brenda		
For State Use Only		
~//	Deputy Oil &	The transfer of
APPROVED BY: Drand	Deputy Oi	
APPROVED BY: Stanfle Conditions of Approval (if any):	Deputy Oi	DATE 12-5-11