

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-031-21074</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>ENERDYNE LLC</b>		6. State Oil & Gas Lease No. <b>LG 2779 0005</b>
3. Address of Operator <b>P.O. BOX 502, ALBUQ., NM 87103</b>		7. Lease Name or Unit Agreement Name <b>STATE</b>
4. Well Location Unit Letter <b>C</b> <b>660</b> feet from the <b>NORTH</b> line and <b>1580</b> feet from the <b>WEST</b> line Section <b>28</b> Township <b>20N</b> Range <b>9W</b> NMPM County <b>McKINLEY</b>		8. Well Number <b>102</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6461' GR</b>		9. OGRID Number <b>185239</b>
Fit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat <b>CHACO WASH MESAVERDE</b>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mll Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

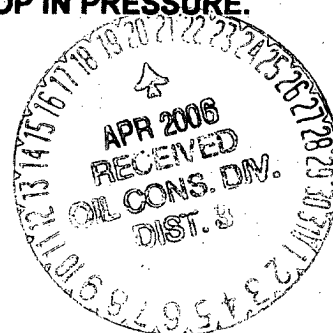
<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" 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.

10-21-05 SPUD WELL. DRILLED 8.75" HOLE TO 146'. SET 138' OF 7" 17# CASING ON 10-29-05.

10-31-05 CEMENTED CASING AND CIRCULATED TO SURFACE WITH 40 SACKS OF CLASS "B" CEMENT.

11-3-05 TESTED SURFACE CASING AT 600 PSI FOR 30 MINUTES. NO DROP IN PRESSURE. RIG UP BOP AND COMMENCED DRILLING 6.25" HOLE.



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 [Signature] TITLE **MANAGING MEMBER** DATE **4-17-06**

Type or print name  
For State Use Only **DON L. HANOSH**

E-mail address:  
**DHANOSH426@AOL.COM**

Telephone No.  
**1-505-332-7807**

APPROVED BY: [Signature]  
**4/24/06**

TITLE  
**DEPUTY OIL & GAS INSPECTOR, DIST. 8**

DATE **APR 20 2006**