| Submit 3 Copies To Appropriate District Office   | State of New Mexico Energy, Minerals and Natural Resources |                              | Form C-103<br>May 27, 2004                    |                                  |             |
|--|--|------------------------------|---|----------------------------------|-------------|
| <u>District I</u><br>1625 N. French Dr., Hobbs, NM 88240   | Laicigy, Minerals and Iva                                  | iuiai icoouroes              | WELL API NO.                                  |                                  | 7           |
| <u>District II</u><br>1301 W. Grand Ave., Artesia, NM 88210  | OIL CONSERVATION DIVISION                                  |                              | 30-031-21074                                  |                                  | <u>_</u> [E |
| District III   | 1220 South St. Francis Dr.                                 |                              |   |                                  | 4           |
| 1000 Rio Brazos Rd., Aztec, NM 87410  District IV  Santa Fe, NM 87505  |  | 6. State Oil & Gas Lease No. |   | 3                                |             |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   |  |                              |   |                                  |             |
| SUNDRY NOTICES AND REPORTS ON WELLS  |  |                              | 7. Lease Name of                              | or Unit Agreement Name           |             |
| (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.)  |  |                              | SIAIE   |                                  | _ °         |
| 1. Type of Well: Oil Well X Gas Well Other   |  |                              | 8. Well Number 102                            |                                  |             |
| 2. Name of Operator ENERDYNE LLC   |  |                              | 9. OGRID Number 185239                        |                                  |             |
| 3. Address of Operator P.O. BOX 502, ALBUQ., NM 87103  |  |                              | 10. Pool name or Wildcat CHACO WASH MESAVERDE |                                  |             |
| 4. Well Location Unit Letter C   | 660 feet from the NOR                                      | RTH line and                 | 1580 feet fire                                | om the WEST line                 |             |
| Section 28   |  | tange 9W                     | NMPM  | County McKINLEY                  | ,           |
|  | 11. Elevation (Show whether Di                             |                              |   |                                  |             |
| Pit or Below-grade Tank Application   or Closure   |  |                              |   |                                  |             |
| Pit type Depth to Groundwa   | iterDistance from nearest fresh                            | water well Distr             | ince from nearest sur                         | face water                       |             |
| Pit Liner Thickness: mil   | Below-Grade Tank: Volume                                   |                              | struction Material                            |                                  |             |
| 12. Check A  | Appropriate Box to Indicate 1                              | Nature of Notice, I          | Report or Other                               | r Data                           |             |
| NOTICE OF IN   |  | 2                            | SEQUENT RE                                    |                                  | _           |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK   |  |                              |   | ALTERING CASING                  | i           |
| TEMPORARILY ABANDON DULL OR ALTER CASING   | CHANGE PLANS   | COMMENCE DRIL                | -   | P AND A                          |             |
| , ott off, area of off   |  |                              | E.S.  |                                  |             |
| OTHER:   |  | OTHER:                       | alian mandanana dar                           | D                                |             |
| 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. |  |                              |   |                                  |             |
|  | DRILLED 8.75" HOLE TO                                      | ) 146'. SET 138'             | OF 7"- 17# C                                  | ASING ON 10-29-0                 | 5.          |
| 10-31-05 CEMENTED CASING AND CIRCULATED TO SURFACE WITH 40 SACKS OF CLASS "B"  |  |                              |   |                                  |             |
| CEMENT.  |  |                              |   |                                  |             |
| <del> </del>   | ACE CASING AT 600 PS<br>IMENCED DRILLING 6.29              |                              | res. No DRC                                   | P IN PRESSURE.                   |             |
| 11-25-05 MUD PUMP  | FAILED; DRILL PIPE S                                       | TUCK AT 975'                 | GR  |                                  |             |
|  | LL PIPE FROM HOLE V  | _                            |   |                                  |             |
|  | WN HOLE AND DRILLE   |                              |   | 180' CP                          |             |
|  | VN HOLE. 5-15-08 RAN                                       |                              |   |                                  | IC          |
|  | CASING TO SURFACE  |                              | •   | •                                | iG.         |
| O TITOO OLIMENTED  | Adillo 10 dolli Adl  | WITH 155 OAC                 | NO OF OLA                                     | OO D OLIVILIAT.                  |             |
|  |  |                              |   |                                  |             |
| I hereby certify that the information a  | shove is true and complete to the l                        | est of my knowledge          | and belief I furth                            | er certify that any nit or below | <del></del> |
| grade tank has been/will be constructed or   | closed according to NMOCD guidelines                       | 🛛, a general permit 🗌 o      | r an (attached) alterr                        | active OCD-approved plan .       | •           |
| SIGNATURE  | TITLE  | MANAGING                     | MEMBER  | DATE 6-8-08                      | v           |
| Time or mint   | E-mail a   | ddenes:                      | 727   | olombona Na                      |             |
| Type or print name For State Use Only  DON L. H.   | ANOSH E-mail a   | aaress:<br>NOSH426@AOI       | COM   | elephone No.<br>1-505-332-7807   |             |
| APPROVED BY: H. VIII   | anners TITLED  | EPUTY OIL & GAS IN           | PECTOR, DIST, &                               | BDATE JUN 1 6 20                 | 108         |
| Do Ports ove Due - Need pt 46 CSL  |  |                              |   |                                  |             |
| APPROVED BY:  Reports our Due - Need pt 4/2 C56 Report # sacks cmt to surface * rig release date   |  |                              |   |                                  |             |