Suomit 3 Copies 10 Appropriate District Office	State of New Mexico		•	Form C-103
District I	Energy, Minerals and Natural R	desources .	WELL API NO.	June 19, 2008
1625 N. French Dr., Hobbs, NM 88240 District II		ا ا	0-045-32972	
1301 W. Grand Ave., Artesia, NM 88210  OIL CONSERVATION DIVISION  1220 Secret. St. Francis Dr.		1910M -	. Indicate Type of Lea	
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		l	STATE 🛛	FEE 🗆
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	. 6	. State Oil & Gas Lea	se No.
SUNDRY NOTIC	ES AND REPORTS ON WELLS		. Lease Name 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.)		СН	State Gas Com BH	
1. Type of Well: Oil Well Gas Well Other			8. Well Number 2	
2. Name of Operator  McElyain Oil & Gas Properties, Inc.		i	9. OGRID Number 22044	
3. Address of Operator			10. Pool name or Wildcat	
1050 17th St, Suite 1800, Denver, CO 80265			Harper Hill Fruit Sand PC	
4. Well Location				
Unit Letter M : 114	40_feet from theSouth line and	825feet f	rom theWestlin	e
Section 32		e 13W	NMPM C	ounty San Juan
	11. Elevation (Show whether DR, RKE 5,618 GL	3, RT, GR, etc.)		
12. Check Ap	ppropriate Box to Indicate Nature	e of Notice, Re	eport or Other Data	ı
NOTICE OF INT	ENTION TO:	SUBSI	EQUENT REPOR	RT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR				ERING CASING
TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DR			<u> </u>	ID A 🔲
	MULTIPLE COMPL   CAS	SING/CEMENT J	ОВ 📙	
DOWNHOLE COMMINGLE				
OTHER: APD Approval Extension		HER:		
	ted operations. (Clearly state all pertin k). SEE RULE 1103. For Multiple Co			
or recompletion.	C). SEE ROLE 1103. For Muniple Co	inpletions: Attac	ii wenoore diagram or	proposed completion
•				
McElvain Oil & Gas requests the appr	oval on this APD be extended for one	year.		
			RCV	D APR 9'09
			OIL	CONS. DIV.
		,		
1	2/21/201	0		DIST. 3
Inal extension	expires 3/21/201	O		
	U			
Spud Date:	Rig Release Date:			
<u> </u>			•	
I hereby certify that the information al	pove is true and complete to the best of	my knowledge a	nd belief	
	O 11	my knomeage u	na conon	
around AM (C	1/2 1/			
SIGNATURE () (C	///w//			
	TITLE_Eng Tech	Supervisor	DATE	4/8/2009
Type or print name _Deborah K Powe				
Type or print name _Deborah K Powe For State Use Only	TITLEEng Tech  II E-mail address: _DebbyP@Mc			33 Ex 308
For State Use Only	II E-mail address: _DebbyP@Mc	Elvain.com	PHONE: _303-893-09	
For State Use Only  APPROVED BY:	II E-mail address: _DebbyP@Mc	Elvain.com	PHONE: _303-893-09	33 Ex 308
	II E-mail address: _DebbyP@Mc	Elvain.com   & Gas Ins  istrict #3	PHONE: _303-893-09	33 Ex 308 APR 0 9 2009
For State Use Only  APPROVED BY:	II E-mail address: _DebbyP@Mc	Elvain.com   & Gas Ins District #3 Current	PHONE: _303-893-09 pector, _ <sub>DATE</sub> NMOCD rule	33 Ex 308  APR 0 9 2009 s and
For State Use Only  APPROVED BY:	II E-mail address: _DebbyP@Mc	Elvain.com   & Gas Ins District #3 Current regulati	PHONE: _303-893-09	33 Ex 308  APR 0 9 2009 s and