Submit 3 Copies 10 Appropriate District	State of New Mexic	0	Form C-103
Office District I	Energy, Minerals and Natural	Resources	June 19, 2008
1625 N French Dr., Hobbs, NM 88240		WELL API	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION D	VISION 30-031-052	Type of Lease
District III	1220 South St. Francis	Dr. STA	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8750	-	& Gas Lease No.
1220 S. St Francis Dr., Santa Fe, NM			
87505 SUNDRY NOTI	CES AND REPORTS ON WELLS	7. Lease N	ame or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		ACK TO A	0
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		1150	
1. Type of Well: Oil Well 🔀 Gas Well 🗌 Other		8. Well Nu	mber 50
2. Name of Operator		9. OGRID	Number
3. Address of Operator	doches Oil and Gas	10 Pool no	me or Wildcat
PO Box 632418 Nacogdoches, TX 75963		Hospah - G	
4. Well Location			P
Unit Letter P : 36	feet from the <u>South</u> line and	660 feet from the	East line
Section 36	Township 18N Range	9W NMPM	County Mckinley
	11. Elevation (Show whether DR, RK		
	6973	· · · · ·	
12. Check A	ppropriate Box to Indicate Natu	e of Notice, Report or C	Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK D PLUG AND ABANDON D REMEDIAL WORK D ALTERING CASING			
	CHANGE PLANS COMMENCE DRILLING OPNS. PAND A		
PULL OR ALTER CASING		SING/CEMENT JOB	
OTHER:		HER:	
	eted operations. (Clearly state all perti		
or recompletion.	k). SEE RULE 1103. For Multiple C	ompletions: Attach wellbore	diagram of proposed completion
or recompletion.			
	High Pressure Water Perforation in a c	lirectional completion into th	e Upper Hospah Sand, using
azimuths 360, 120, 90 and 45 degree	s up to 600° from wellbore.		
	Approved For High	Pressure Water	
	Perforation And		DAIDMANDOHA
	Complet	,	RCVD MAR 8'10
		the second s	OIL CONS. DIV.
	This Is Not A Drilling	Operation	DICT O
			DIST. 3
Spud Date:	Rig Release Date:		
I handhar aantifa that tha information			
i necess certify that the information a	bove is true and complete to the best of	my knowledge and belief.	,
SIGNATURE <u>Mike Allen</u>	TITLE VP Engineerin	4 Production DATE 0	<u>3-05-10</u>
Tuno or print source		,	
Type or print name For State Use Only	E-mail address:		PHONE:
	Deputy 0	Dil & Gas Inspector,	MAR 0 9 2010
APPROVED BY:	TITLE	District #3	DATE

APPROVED BY: ______ Conditions of Approval (if any):