

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88270  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

HOBBS OCD

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

FEB 29 2012

RECEIVED

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. 30-025-40397 ✓
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 THREE RIVERS OPERATING CO., LLC		6. State Oil & Gas Lease No. 309209 ✓
3. Address of Operator 1122 S. CAPITAL OF TX HWY., #325 AUSTIN, TX 78745		7. Lease Name or Unit Agreement Name AIRSTrip 6 STATE <i>corn</i>
4. Well Location Unit Letter <u>L</u> : <u>2171</u> feet from the <u>SOUTH</u> line and <u>665</u> feet from the <u>WEST</u> line Section <u>6</u> Township <u>19S</u> Range <u>35E</u> NMPM County <u>LEA</u>		8. Well Number #2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3903' GR		9. OGRID Number 272295
		10. Pool name or Wildcat SCHARB; BONE SPRING ✓

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Three Rivers Operating Co., LLC respectfully requests to change the surface location of the subject well from 1830' FSL & 660' FWL to 2171' FSL & 665' FWL. Surface locations change is requested due to pipeline obstruction at the previous location.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Mike Daniel* TITLE OPERATIONS ENGINEER DATE 02/29/12

Type or print name MIKE DANIEL E-mail address: mdaniel@3rn.com PHONE: 512-706-9850

For State Use Only

APPROVED BY: *[Signature]* TITLE PETROLEUM ENGINEER DATE FEB 29 2012  
Conditions of Approval (if any):

FEB 29 2012