

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 88210
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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised August 1, 2011

HOBBS OGD CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
JUN 25 2012

WELL API NO. 30-005-10433
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Chaveroo SA Haley Unit
8. Well Number 32
9. OGRID Number 164557
10. Pool name or Wildcat Chaveroo-San Andres

SUNDRY NOTICES AND REPORTS ON WELLS
(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.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator Ridgeway Arizona Oil Corp
3. Address of Operator 200 N. Loraine, STE 1440 Midland, TX 79701
4. Well Location Unit Letter <u>1</u> : <u>660</u> feet from the <u>N</u> line and <u>660</u> feet from the <u>E</u> line Section <u>3</u> Township <u>08S</u> Range <u>33E</u> NMPM County <u>Chaves</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 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: Workover <input checked="" 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.

MIRU PU - POOH w/ all down hole equipment (rods/pumps/tubing)
Pick up bit/WS to ck. TD - clean out as necessary
POOH w/WS/Bit - pick up Pkr. - set Pkr. within 100' of top perf. - Pressure test casing to 500PSI. (MIT)
Rig up chart recorder - call BLM to witness MIT **OGD Hobbs**
If casing passes MIT - RIH w/ good tubing/pump/rod string - hang well on and return well to production

There will also be some pumping unit/surface facility maintenance associated with this reactivation

**Condition of Approval: Notify OCD Hobbs
office 24 hours prior to running MIT Test & Chart.**

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 Jana True TITLE Mgr - Prorations/Regulatory DATE 6/22/12

Type or print name Jana True E-mail address: jtrue@enhancedoilres.com PHONE: 432-687-0303

For State Use Only

APPROVED BY [Signature] TITLE STAFF MGR DATE 6-28-2012

Conditions of Approval (if any): ☐ After remedial work has been done Form C-104 is also required by the OCD with 24 hour producing test, perms, tubing size & depth to put this well back on production