

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720
District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 67402

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: ☐		WELL API NUMBER 30-015-35676
		5. Indicate Type of Lease S
		6. State Oil & Gas Lease No.
2. Name of Operator REEF EXPLORATION, L.P.		7. Lease Name or Unit Agreement Name STATE 2
3. Address of Operator 1901 N. CENTRAL EXPRESSWAY, , SUITE 300 RICHARDSON, TX 75080		8. Well Number 004
4. Well Location Unit Letter K : 1980 feet from the S line and 1980 feet from the W line Section 2 Township 23S Range 31E NMPM Eddy County		9. OGRID Number 246083
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3414 GR.		10. Pool name or Wildcat See Area 13
Pit or Below-grade Tank Application ☐ or Closure ☐ Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Perforations/Tubing** ☒

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.
See attached TIFF file.

Perforations

Pool: LIVINGSTON RIDGE;DELAWARE, SOUTH, 96149 Location: K -2-23S-31E 1980 S 1980 W

TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount
8162	8224	N	1		SlickWater	Acid	1300
8162	8224	N	1		Sand/Water	Frac	54680
8007	8114	N	1		Sand/Water	Frac	25400

Tubing

LIVINGSTON RIDGE;DELAWARE, SOUTH, 96149

Tubing Size	Type	Depth Set	Packer Set
2.875	J-55	8163	0

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Regulatory Analyst DATE 1/11/2008

Type or print name Rosalind Mercer E-mail address rosalind@reefexploration.com Telephone No. 972-437-6792

For State Use Only:

APPROVED BY: Bryan Arrant TITLE Geologist DATE 1/22/2008 8:12:16 AM