

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 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  
August 1, 2011

Permit 168704

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| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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 NUMBER<br>30-025-41093                      |
| 1. Type of Well: O  |  | 5. Indicate Type of Lease<br>S                       |
| 2. Name of Operator<br>MURCHISON OIL & GAS INC  |  | 6. State Oil & Gas Lease No.                         |
| 3. Address of Operator<br>1100 Mira Vista Blvd., Plano, TX 75093  |  | 7. Lease Name or Unit Agreement Name<br>JACKSON UNIT |
| 4. Well Location<br>Unit Letter <u>O</u> : <u>200</u> feet from the <u>S</u> line and <u>2435</u> feet from the <u>E</u> line<br>Section <u>22</u> Township <u>24S</u> Range <u>33E</u> NMPM Lea County   |  | 8. Well Number<br>024H                               |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3539 GR  |  | 9. OGRID Number<br>15363                             |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ |  | 10. Pool name or Wildcat                             |

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

|  |   |
|--|---|
| <b>NOTICE OF INTENTION TO:</b><br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>Other: _____ | <b>SUBSEQUENT REPORT OF:</b><br>REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/><br>Other: <b>Drilling/Cement</b> <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  
 6/12/13 TD 12.25" hole @ 5255'. Set 9.625" 40# L-80 csg @ 5248'. Cmt w/1340 sx Class C; tailed w/743 sx Class C. Circ 222 sx to surface.  
 6/14/13 WOC 24 hrs. Test csg to 1500 psi for 15 min. - OK.

**Casing and Cement Program**

| Date     | String | Fluid Type | Hole Size | Csg Size | Weight lb/ft | Grade | Est TOC | Dpth Set | Sacks | Yield | Class | 1" Dpth | Pres Held | Pres Drop | Open Hole |
|----------|--------|------------|-----------|----------|--------------|-------|---------|----------|-------|-------|-------|---------|-----------|-----------|-----------|
| 08/03/13 | Surf   | FreshWater | 16        | 13.375   | 54.5         | J-55  | 0       | 1259     | 995   |       | C     |         | 1900      | 0         |           |
| 08/12/13 | Int1   | CutBrine   | 12.25     | 9.625    | 40           | L-80  | 0       | 5248     | 2083  |       | C     |         | 1500      | 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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE COO DATE 6/14/2013  
 Type or print name Michael Daugherty E-mail address ccottrell@jdmii.com Telephone No. 972-931-0700

**For State Use Only:**  
 APPROVED BY: Paul Kautz TITLE Geologist DATE 6/14/2013 3:32:51 PM