Submit 1 Copies 10 Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		October 13, 2009 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONCEDIVATION DIVICION		30-019-20137
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa I C, 141VI 67505		6. State Oil & Gas Lease No. NA
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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			Singleton Properties LLC
PROPOSALS.)			8. Well Number
1. Type of Well: Oil Well			Latigo Ranch 3-5
2. Name of Operator SWEPI LP		9. OGRID Number 250036	
3. Address of Operator		10. Pool name or Wildcat	
P.O. Box 576, Houston, TX 77001		Wildcat	
4. Well Location			
Unit Letter K	1831 +/ feet from the Sou	th line and	
Section 5	Township 10N	Range 23E	NMPM County Guadalupe
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4717+/- graded			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	NTENTION TO:	SU	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK		REMEDIAL WO	
TEMPORARILY ABANDON X PULL OR ALTER CASING □		COMMENCE DE	RILLING OPNS. P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE		CASING/CEIVIEI	NT JOB 📙
500000000000000000000000000000000000000			
OTHER:		OTHER: PROD	UCTION
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.			
As indicated in our Form C-105, SWEPI LP has shut-in the subject well and proposes to temporarily abandon the well. The well will be placed on a periodic pressure monitoring program to evaluate well integrity.			
Spud Date: February 9, 2009	Rig Release I	Date: April 5, 20	009
I hereby certify that the information	above is true and complete to the	best of my knowled	ge and helief
SIGNATURE: Michael J. Senior Regulatory Advisor DATE: 05/13/2010			
SIGNATURE: // // DATE: _05/13/2010			
Type or print name:Michael L. Bergstrom E-mail address:michael.bergstrom@shell.com_ PHONE:303-222-6347			
For State Use Only			
APPROVED BY: Martino TITLE DISTRICT SUPERVISOR DATE 5/17/10 Conditions of Approval (if any):			