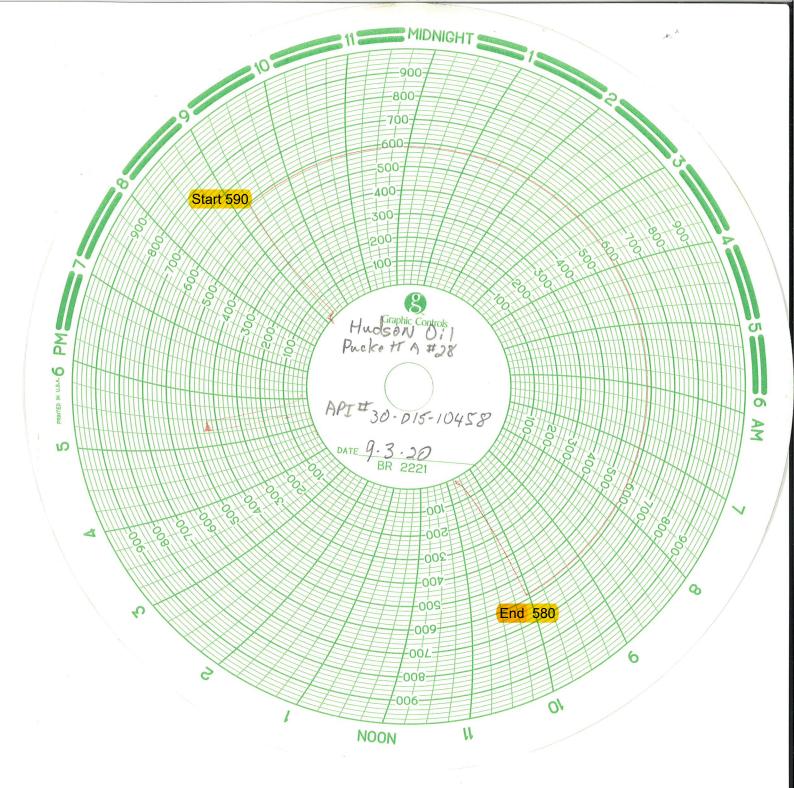
Submit I Copy To Appropriate District	State of New Mexico	NMOCD Rec'd: 9/23/2020 Form C-103
<u>District 1</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resource	Revised July 18, 2013 WELL API NO. 30-015-10458
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		NMLC029415A
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		Puckett A
PROPOSALS.)		8. Well Number 28
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator		9. OGRID Number
Hudson Oil Company of Texas		025111
3. Address of Operator		10. Pool name or Wildcat
616 Texas Street, Fort Worth, Texas 76102		Maljamar Grayburg-San Andres
4. Well Location		***
Unit Letter C: 25		d 1345 feet from the West line
Section 24	Township 17S Range 31E	NMPM Eddy County
1	1. Elevation (Show whether DR, RKB, RT, GR	R, etc.)
TEMPORARILY ABANDON CONTROL OF PULL OR ALTER CASING NOTHER: Mechanical Integrity To 13. Describe proposed or complete of starting any proposed work) proposed completion or recomplete.	REMEDIAL COMMENCE CASING/CE BULTIPLE COMPL CASING/CE Best OTHER: d operations. (Clearly state all pertinent detail see RULE 19.15.7.14 NMAC. For Multipeletion. Control of the annual Mechanical Integration of the annual Mechanical Integration.	EDRILLING OPNS. PAND A EMENT JOB ils, and give pertinent dates, including estimated date le Completions: Attach wellbore diagram of grity Test for the referenced well.
Spud Date:	Rig Release Date:	
I hereby certify that the information abo	ive is true and complete to the best of my know	wledge and belief.
SIGNATURE	TITLE President	DATE
Type or print name E. Randall Hud For State Use Only	son III E-mail address: frankg@ Frank Ga	hudsonoil.com PHONE: 575-365-8165 llindo, Field Superintendent
ADDD OVED BY	THE P	DATE
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE



9/3/20 DOUNT #13 AUN SON A #28 HUSSON A

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