

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-23850
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name VASQUEZ
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	RECEIVED JUL - 3 2006 OGD-ARTESIA	8. Well Number 1
2. Name of Operator OGX RESOURCES LLC		9. OGRID Number 217955
3. Address of Operator P.O. BOX 2064, MIDLAND, TEXAS 79702		10. Pool name or Wildcat
4. Well Location Unit Letter <u>J</u> : <u>2310</u> feet from the <u>SOUTH</u> line and <u>1980</u> feet from the <u>EAST</u> line Section II Township 24-S Range 28-E NMPM EDDY County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2984'		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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"/>	
OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

OGX RESOURCES LLC PROPOSES TO RE-COMplete THIS WELL IN A MORROW ZONE. WE PLAN TO PERFORATE 12,718'-38' & 12,750'-54' UNDER A PACKER USING TUBING COVERED GUNS & TO PERFORATE 12,586'-90'; 12,610'-18' & 12,628'-44' UNDER A PACKER W/ THROUGH TUBING GUNS. THE WELL WILL BE FLOW TESTED DOWN THE SALES LINE & EVALUATED FOR FURTHER STIMULATION.

IN ADDITION, OGX PLANS TO USE STEEL TANKS FOR ANY CIRCULATION NEEDS VERSUS ANY PIT CONSTRUCTION. THEREFORE, WE REQUEST EXEMPTION FROM C-144 OR PIT RESTRICTION FOR THIS WELL WORK.

A 11" X 3000 PSI HYDRAULIC BOP INSTALLED DURING THIS OPERATION.

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  TITLE OPERATIONS MANAGER DATE 6/28/2006

Type or print name BRIAN RAMEY E-mail address: brian@ogxresources.com Telephone No. 432-685-1739 ext. 234
For State Use Only

APPROVED BY: _____ TITLE _____ DATE JUL 14 2006
 Conditions of Approval (if any): **FOR RECORDS ONLY**

Re-Submit on C101; C102.
 NSL is Required