

Submit 3 Copies to Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
1301 W. Grand Ave., Las Cruces, 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

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

Form C-103
Revised May 08, 2003

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.)		WELL API NO. 30-015-34854
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator LCX Energy, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 110 N. Marienfeld, Ste. 200, Midland, TX 79701		7. Lease Name or Unit Agreement Name: 1625 STATE COM
4. Well Location Unit Letter <u>M</u> : <u>560</u> feet from the <u>WEST</u> line and <u>760</u> feet from the <u>SOUTH</u> line Section <u>9</u> Township <u>16S</u> Range <u>25E</u> NMPM County <u>EDDY</u>		8. Well Number <u>91</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3521.2' GR</u>		9. OGRID Number <u>218885</u>
		10. Pool name or Wildcat

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" 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.

10/17/06 - 10/24/06 DRILL FROM 2062' TO 4950'. SPOT CEMENT KO PLUG 500 SX H+1.2%CD31+5% SALT. TOH TO 4100'. RREVERSE OUT CIRC 75 SX TO RESERVE PIT. TOH TO 3600'. WOC. TOTAL WOC 25 HOURS. DRILL CEMENT FROM 4107 TO 4163'.

10/25/06 - 11/9/06 KICK OFF 8 3/4" HOLE AT 4338'. END OF CURVE IS 4906'.

11/10/06 TD WELL AT 8712'.

11/11/06 RIG REPAIRS

11/12/06 - 11/13/06 RUN 5 1/2" CASING. 1 5 1/2" FLOAT SHOE BTC, 1 JT 5 1/2" CASING 17# P110 BTC, 1, 5 1/2" FLOAT COLLAR BTC, 99 JTS 5 1/2" CASING 17# P110 BTC, 8 JTS 5 1/2" CASING 17# P110 LT&C, 94 JTS 5 1/2" CASING 17# N-80 LT&C. SET CASING AT 8712'. CIRC CASING. RIG UP BJ AND CEMENT 630 SX 50:50:10C+.2/10%SMS+.2/10%FL-52A, 650 SXS H+1.4%FL-62+1/10%ASA301+40#/SKCAC03+.2/10%SMS. DISPLACE W/ 191 BBLs OF H2O. BUMP PLUG TO 2656 PSI, FLOATSHELD OK. CIRCULATED 96 SX CEMENT TO PITS. ND SET SLIPS. CUT OFF CASING HEAD, INSTALL TUBING HEAD AND TEST TO 2000 PSI. HUNG 85K IN SPOOL. RIG RELEASED @ 8:30 PM. WO FRAC.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kanicia Carrillo TITLE Regulatory Agent DATE 11/20/06

Type or print name KANICIA CARRILLO

Telephone No. 432-262-4013

(This space for State use)

APPROVED BY Accepted for record - NMOCD TITLE DATE 11/20/06
Conditions of approval, if any: