

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.

30-005-63067

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

N/A

7. Lease Name or Unit Agreement Name

Northern Lights

8. Well Number

1

9. OGRID Number

001092

10. Pool name or Wildcat

Bullseye Fusselman

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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

Armstrong Energy Corporation

505-625-2222

3. Address of Operator

P.O. Box 1973, Roswell, NM 88202-1973

4. Well Location

Unit Letter O : 449 feet from the South line and 2183 feet from the East line

Section 7 Township 8S Range 29E NMPM County Chaves

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

4068 GR

Pit or Below-grade Tank Application ☐ or Closure ☐ Steel Tanks

Pit type Steel Tanks Depth to Groundwater 600 Distance from nearest fresh water well 2 miles Distance from nearest surface water 2.5 miles

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:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☐

OTHER: ☐

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.

After hot oiling the well, the casing loaded, indicating a bridge in the annulus. This suggests a casing leak or collapsed casing. Prep to rig up a completion unit, P.O.H. with rods and pump, and recover tubing. Clean out casing and run casing inspection log. Repair casing and return to production.

Anticipated start date January 3, 2007.

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 B. Stubbs TITLE Vice President-Operations DATE 12-29-06

Type or print name Bruce A. Stubbs

E-mail address: bastubbs@zianet.com

Telephone No. 505-625-2222

For State Use Only

APPROVED BY: Accepted for record - NMOCB DATE 1/9/07

Conditions of Approval (if any):