Energy, Minerals and Natural Resources   Revised March 25, 199
District II 811 South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505  Santa Fe, NM 87505  Santa Fe, NM 87505  Santa Fe, NM 87505  Sunda Fe, NM 87505  State Oil & Gas Lease No. 648  7. Lease Name or Unit Agreement Name:  Oil Ferent Reservoir. Use "Application for Permit" (Form C-101) For Such Proposals.)  1. Type of Well:  Oil Well Gas Well Other INJECTION  2. Name of Operator  ERS Resources Inc.  3. Address of Operator  P.O. Box 1234, Lovington, NM 88260  OIL CONSERVATION DIVISION  1220 South St. Francis Dr.  Santa Fe, NM 87505  State Oil & Gas Lease No. 648  7. Lease Name or Unit Agreement Name:  Artesia Metex Unit  8. Well No.  FEB 1 3 2007  OCD - ARTESIA. NM  9. Pool name or Wildcat  Artesia; Queen GB San Andres
Sunday   South First, Artesia, NM 88210   District III
STATE   STAT
Santa Fe, NM 8/505  Santa Fe, NM 8/505  6. State Oil & Gas Lease No. 648  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 INJECTION  2. Name of Operator ERS Resources Inc.  3. Address of Operator P.O. Box 1234, Lovington, NM 88260  6. State Oil & Gas Lease No. 648  7. Lease Name or Unit Agreement Name:  Artesia Metex Unit  8. Well No.  FEB 1.3 2007 9. Pool name or Wildcat  Artesia; Queen GB San Andres
SUNDRY NOTICES AND REPORTS ON WELLS   SUNDRY NOTICES AND REPORTS ON WELLS
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 INJECTION  2. Name of Operator  ERS Resources Inc.  3. Address of Operator  P.O. Box 1234, Lovington, NM 88260  7. Lease Name or Unit Agreement Name:  Month - Year  8. Well No.  FEB 1 3 2007  9. Pool name or Wildcat  Artesia; Queen GB San Andres
(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 X Other INJECTION  2. Name of Operator  ERS Resources Inc.  3. Address of Operator  P.O. Box 1234, Lovington, NM 88260  Artesia Metex Unit  8. Well No.  FEB 1 3 2007  9. Pool name or Wildcat  Artesia; Queen GB San Andres
Oil Well Gas Well X Other INJECTION  2. Name of Operator  ERS Resources Inc.  3. Address of Operator  P.O. Box 1234, Lovington, NM 88260  Other INJECTION  Month - Year  FEB 1 3 2007  OCD - ARTESIA. NM  9. Pool name or Wildcat  Artesia; Queen GB San Andres
2. Name of Operator  ERS Resources Inc.  3. Address of Operator  P.O. Box 1234, Lovington, NM 88260  Month - Year  FEB 1 3 2007  OCD - ARTESIA, NM  9. Pool name or Wildcat  Artesia; Queen GB San Andres
ERS Resources Inc.  3. Address of Operator  P.O. Box 1234, Lovington, NM 88260  P.O. Box 1234, Lovington, NM 88260  P.O. Box 1234, Lovington, NM 88260  32  9. Pool name or Wildcat  Artesia; Queen GB San Andres
P.O. Box 1234, Lovington, NM 88260  9. Pool name or Wildcat  Artesia; Queen GB San Andres
P.O. Box 1234, Lovington, NM 88260  9. Pool name or Wildcat  Artesia; Queen GB San Andres
P.O. Box 1234, Lovington, NM 88260 Artesia; Queen GB San Andres
4. Well Location
Unit Letter C 380 feet from the South line and 2110 feet from the West line
Section 30 Township 18S Range 28E NMPM Eddy County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  ALTERING CASING
TEMPORARILY ABANDON
PULL OR ALTER CASING  MULTIPLE  CASING TEST AND CEMENT JOB
OTHER: OTHER: Return to Injection
12. 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 recompilation.
2/7/07 Replaced tbg. & pkr. Tested backside to 500#, OK. Returned to injection. Chart attached.
I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Dilli MKeley TITLE Clay Tipton SecTreas. DATE 2/9/07
and the second
SIGNATURE OF CLAY Tipton SecTreas. DATE 2/9/07  Type or print name CorClay Tipton Telephone No. 505-631-4121  (This space for State 1987)
SIGNATURE Delia M Keley TITLY Clay Tipton SecTreas. DATE 2/9/07  Type or print name Lanclay Tipton Telephone No. 505-631-4121

