Submit 3 Copies To Appropriate District	State of New M	[exico	Form C-103
Office District I	Energy, Minerals and Natural Resources		Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 811 South First, Artesia, NM 88210	OIL CONSERVATION	N DIVISION	30-015-04845
District III	1220 South St. Fra	ancis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM S	37505	STATE FEE
1220 S. St. Francis Dr., Santa Fe, NM	·		6. State Oil & Gas Lease No. FEDERAL LEASE
87505	CES AND REPORTS ON WELI	C	7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOS			7. Lease Name of Omit Agreement Name.
DIFFERENT RESERVOIR. USE "APPLIC			NORTHEAST SQUARE LAKE
PROPOSALS.) 1. Type of Well:			HORITEMET SQUING EMILE
	X Other Injection		
2. Name of Operator	X Other Injection	1 2 2 2	8. Well No.
Tipton Oil & Gas Acquisitions, Inc			25
3. Address of Operator			9. Pool name or Wildcat
-	2260		
P.O. Box 1234, Lovington, NM 88	.260	8	Northeast Square Lake
4. Well Location			
Unit LetterI: 2310feet from theSouth_line and990feet from theEastline			
Oint Letteri2510_	_reet from the <u>south</u> fine and	1	the <u>East</u> me
Section 10	Township 16S Ran	ige 31E	NMPM Eddy County
	10. Elevation (Show whether		
år	· · · · · · · · · · · · · · · · · · ·		and the second and th
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK		REMEDIAL WOR	<u> </u>
TENT ON THE MEDIAL WORK	120071107107110011	TREMEDIAL WOR	ALTERINO GAGINO E
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	LLING OPNS. PLUG AND
DISILI OD ALTER CASING	MULTIPLE	CASING TEST A	ABANDONMENT —
PULL OR ALTER CASING L	COMPLETION	CEMENT JOB	
OTHER:		OTHER: TA Exte	ension – Casing Test $\overline{X}$
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.			
ADDDOVAL TO TA WAS OD	ANTED DV OCD TIDOUCI	12/5/07 DEOLIES	T DED AGGGON TO EVTEND TA
APPROVAL TO TA WAS GRANTED BY OCD THROUGH 3/5/07. REQUEST PERMISSION TO EXTEND TA STATUS FOR FOR RE-EVALUATION AS AN INJECTOR OR POSSIBLE CONVERSION TO PRODUCER.			
STATUS FOR FOR RE-EVAL	OATION AS AN INJECTOR		
2/8/2007			emporary Abandoned StatusApproved
2/0/2007		;	Until 2-7-10
TESTED CASING TO 500 PSI	FOR 30 MIN. OKAY, CHA	RT ATTACHED. <sup>1</sup>	UTIHI 0 1 10
I hereby certify that the information	n above is true and complete to the	ne best of my knowled	dge and belief.
0.445	Mail A		
SIGNATURE Selver	TITLE Agent, I	For Clay Tipton, Prince	<u> </u>
Type or print name Debbie McKelvey Telephone No. 505-392-3575			
(This space for State year			
· · · · · · / /_	6	Geny (	FEB <b>1 4</b> 2007
APPPROVED BY / OW	TITLE	Deputy Field	<b>Inspector</b> DATE
Conditions of approval, if any:	,	District # -	Artesia
, · · · · · · · · · · · · · · · · · · ·			

