

State of New Mexico
Energy, Minerals and Natural Resources

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

WELL API NO.

30-015-00658

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
South Red Lake Unit II

8. Well Number #13

9. OGRID Number

241598

10. Pool name or Wildcat

Redlake, Qn, GB, SQ

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

Fairway Resources Operating, LLC

3. Address of Operator

538 Silicon Drive, Suite 101, Southlake, TX 76092

4. Well Location

Unit Letter E : 2,310 feet from the North line and 990 feet from the West line

Section 36 Township 17S Range 27E NMPM Eddy County

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

Pit or Below-grade Tank Application ☐ or Closure ☐

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:

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.

Csg size 4 1/2" set @ 1,385' with cement, circulate to surface.

MIRU. TOH with pmp and rods.

TIH with CIBP and set @ 1,300'

Circulate packer fluid.

Pressure test csg to 500# for 30 minutes.

POH with tbq.

Well is TA.

TA Status will be approved only upon
receipt of Final C-103 and a witnessed
MIT Test. Notify OCD 24 hours prior to
testing.

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 Cindy Flood TITLE Office ManagerDATE 3/8/2007Type or print name Cindy Flood E-mail address: cflood@fairwayresources.com Telephone No. 817-416-1946

For State Use Only

Gerry Guye
Deputy Field Inspector
District II - Artesia

APPROVED BY: [Signature] TITLEDATE MAR 12 2007

Conditions of Approval (if any):

CORRECTED COPY