

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88201  
District III  
1000 Rio Brazos Rd., Aztec, NM 87401  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

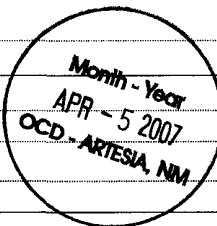
State of New Mexico  
Energy, Minerals and Natural Resources

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

Form C-103  
Revised March 25, 1999

WELL API NO.
30-015-00956
5. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name:
Artesia Metex Unit
8. Well No.
54
9. Pool name or Wildcat
Artesia; Queen GB San Andres

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input type="checkbox"/>	Gas Well <input type="checkbox"/>
Other INJECTION <input type="checkbox"/>	
2. Name of Operator	
ERS Resources, Inc.	
3. Address of Operator	
P.O. Box 1234, Lovington, NM 88260	
4. Well Location	
Unit Letter <u>O</u> <u>990</u> feet from the South line and 2310 feet from the East line	
Section <u>25</u>	Township <u>18S</u> Range <u>27E</u> 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	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER: Return to Injection <input checked="" type="checkbox"/>
OTHER: <input type="checkbox"/>	

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.

2/5/2007 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 Clay Tipton TITLE Clay Tipton (Sec-Treas) DATE 2/9/07

Type or print name Clay Tipton Telephone No. 505-631-4121

(This space for State use)

APPROVED BY Gerry Guye TITLE Deputy Field Inspector DATE APR 6 2007  
Conditions of approval, if any: District II - Artesia

