State of New Mexico Office State of New Mexico	Form C-103 May 27, 2004
District 1 Energy, Minerals and Natural Resources 1625 N French Dr., Hobbs, NM 88240	WELL API NO.
District II 1301 W Grand Ave : Artesia, NM 88210 OIL CONSERVATION DIVISION	30-023-20012 5. Indicate Type of Lease
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410	STATE STATE
District IV Santa Fe, NM 8/505 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	HUECO SOUTH UNIT 26 STATE 8. Well Number 00:
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator	9. OGRID Number 251054
DAN A. HUGHES COMPANY, L.P.	
3 Address of Operator c/o Oil Reports & Gas Services, Inc. 1008 W. Broadway, Hobbs, NM 88240	10. Pool name or Wildcat (97660) WILDCAT; PERCHA SHALE
4. Well Location	, ,
Unit Letter M . 660 feet from the SOUTH line and	
Section 26 Township 32S Range 17W NMPM 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	HIDALGO County
4527.68' GR Pit or Below-grade Tank Application or Closure	The state of the s
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	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	RILLING OPNS. P AND A
OTHER: DRLG	
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.	
02/13/08-02/27/08 DRLG RESUMED FROM 7605'-10,000'	
SURVEY 7742'.7996',8282',8586',9030',9228'.9540',9646'	
, , , , , , , , , , , , , , , , , , ,	
I hereby certify that the information above is true and complete to the best of my knowled grade tank has been/will be constructed or closed according to SMOCD guidelines , a general permit	ge and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan
SIGNATURE MY HEARD. TITLE AGENT	DATE <u>02,28.08</u>
Type or print name Gaye Heard E-mail address: gheard@oilreportsin/com For State Use Only	Telephone No. 575-393-2727
APPROVED BY SEMBERS MULLSWITTE (IMP) igue	p Officer DATE
Conditions of Approval (if any):	APPROVED MAR 1 0 2008