

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.

30-015-23913

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

NM109695X

7. Lease Name or Unit Agreement Name

SOUTH RED LAKE II UNIT

8. Well Number 43

9. OGRID Number

241598

10. Pool name or Wildcat

REDLAKE/QN/GRYBG/SA

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

OCT 21 2008

3. Address of Operator

538 SILICON DRIVE, SUITE 101, SOUTHLAKE, TX 76092

OCD-ARTESIA

4. Well Location

Unit Letter K : 1650 feet from the SOUTH line and 1650 feet from the WEST lineSection 36Township 17SRange 27E

NMPM

County EDDY

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

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 ☐DOWNHOLE COMMINGLE ☐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.

Spud date: 9/23/81

8 5/8" surface casing at 452'. Cement 350 sxs circ to surface.

4 1/2" casing at 1764' cement with 610 sxs cement.

2 3/8" tbgs set at 1739'.

ACCEPTED FOR RECORD

OCT 21 2008

Gerry Guye, Deputy Field Inspector
NMOCD-District II ARTESIA

Proposal to T&A

Rig PU and POH with production equipment.

TOC at 1330' by CBL.

Go in hole and set CIBP at 1400'. Spot 25 sxs cement plug on top.

Pressure test casing to 500 psi, temporarily abandon unit.

RD and move off PU.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Star Hasse TITLE engineering tech DATE 10/17/08Type or print name Star Hasse E-mail address: shasse@fairwayresources.com PHONE: 817-416-1946**For State Use Only**

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____