Submit 3 Copies To Appropriate District Office	State of New Mexico gy, Minerals and Natural Resources	Form C-103 June 19, 2008
District I Effect 1625 → French Dr., Hobbs, NM 88240	gy, winiciais and readiai resources	WELL API NO. 30-015-22008
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL	# District II	
District III 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE  FEE
1000 Rio Brazos Rd., Aztec, NM 87410  District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505  Santa Fe, NM 87505		6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name		
(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.)		Quail state
I Type of Well: Oil Well Det Gas Well Other		8. Well Number
2. Name of Operator DEC 18 2008		9. OGRID Number 8853
3. Address of Operator OCD-ARTESIA		10. Pool name or Wildcat
4. Well Location /6/8	Artegra	yates Scuenkivers
Unit Letter N: 990 feet from the South line and 1650 feet from the East, line		
Section 8 Township / Range 28 NMPM County Edd 4		
II. Eleva	ation (Show whether DR, RKB, RT, $GR$ , etc., $CR$	)
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON COMMENCE DRILLING OPNS. PAND A COMMENCE DRILLING OPNS. PAND A		
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB		
DOWNHOLE COMMINGLE	_	
OTHER: 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.		
mud hole pump cement plug 255x at 1520' tag at		
1462, rig up ISI wive Line free Point 5/2 at 1000		
Pull 51/2, run tub. to 1030' pump 25 3+ cement. tag		
Doll 51/2, run tub. to 1000' pump 25 st cement. tag at 963' pump 25 st at 650' tag at 571'		
place on fung.		
	promote promot	
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Sugget Was TITLE OWNER DATE 12-18-08  Type or print name George & Masc T E-mail address: 3) Chase of my Way PHONE: 575 3658702  For State Use Only  Com		
Type or print name George Allege I E-mail address: 3   Chase of my Way PHONE: 575 3658702		
For State Use Only . Com		
Conditions of Approval III any i		
NMOCD #		

## Quail State #1

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Accepted for record NMOCD

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