

Submit 1 Copy To Appropriate District  
Office  
District I  
1625 N French Dr., Hobbs, NM 88240  
District II  
1301 W Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S St Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
October 13, 2009

RM

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

WELL API NO. 30-015-37296
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 Challenger 1 State
8. Well Number 2H
9. OGRID Number 217955
10. Pool name or Wildcat Corral Draw Delaware Northwest (96464)

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	<b>RECEIVED</b> <b>MAR 11 2010</b> <b>NMOCD ARTESIA</b>
2. Name of Operator OGX Resources LLC	
3. Address of Operator P. O. Box 2064 Midland, Texas 79701	
4. Well Location Unit Letter <u>3</u> : <u>660</u> feet from the <u>      </u> North line and <u>1980</u> feet from the <u>      </u> West line Section <u>1</u> Township <u>25S</u> Range <u>29E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3118'	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/9/10 Ran 8 5/8" 32#, J55, STC intermediate csg in 10 5/8" hole to 3190'. Cmt with 940 sxs lead Cl C + 4% D20 + 1% S1 +.125 PPSD 130 + 2% D46, 200 sxs tail Cl C + 1% S1. Circ 130 sxs, 60 bbls to surface.

Spud Date:

3/3/2010

Rig Release Date:

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

SIGNATURE

*Shelley Bush*

TITLE Production Clerk

DATE 3/9/2010

Type or print name Shelley Bush

E-mail address: shelley@ogxresources.com

PHONE: 432/685-1287

For State Use Only

APPROVED BY:

*David Gray*

TITLE Field Supervisor

DATE 3-15-2010

Conditions of Approval (if any):