

Submit 3 Copies 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  
 Revised March 25, 1999

CIBP  
 DP

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

WELL API NO. <b>30-015-04846</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>E6418</b>
7. Lease Name or Unit Agreement Name: <b>North East Square Lake</b>
8. Well No. <b>9</b>
9. Pool name or Wildcat <b>NE Square Lake</b>

**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  
**Aghorn Operating Inc.**

3. Address of Operator  
**P O Box 12663**

4. Well Location  
 Unit Letter **D** : **660** feet from the **North** line and **660** feet from the **West** line  
 Section **11** Township **16S** Range **31E** NMPM County **Eddy**

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"/>	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"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <b>TA'd (casing test)</b> <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.

**Well was TA'd in February 2002.**  
**Set CIBP @ 3878', capped w/ 4 sx. class "C" neat cmt. Loaded hole w/ 10# brine. POOH w/ all equipment. Replace tubing head flange. RIH w/ 6' sub. Tested csg. to 560 psi. Held for 30 minutes. Witnessed by Mr. Bratcher w/ OCD. Chart Attached.**

Temporary Abandoned Status approved  
 until 2-1-07

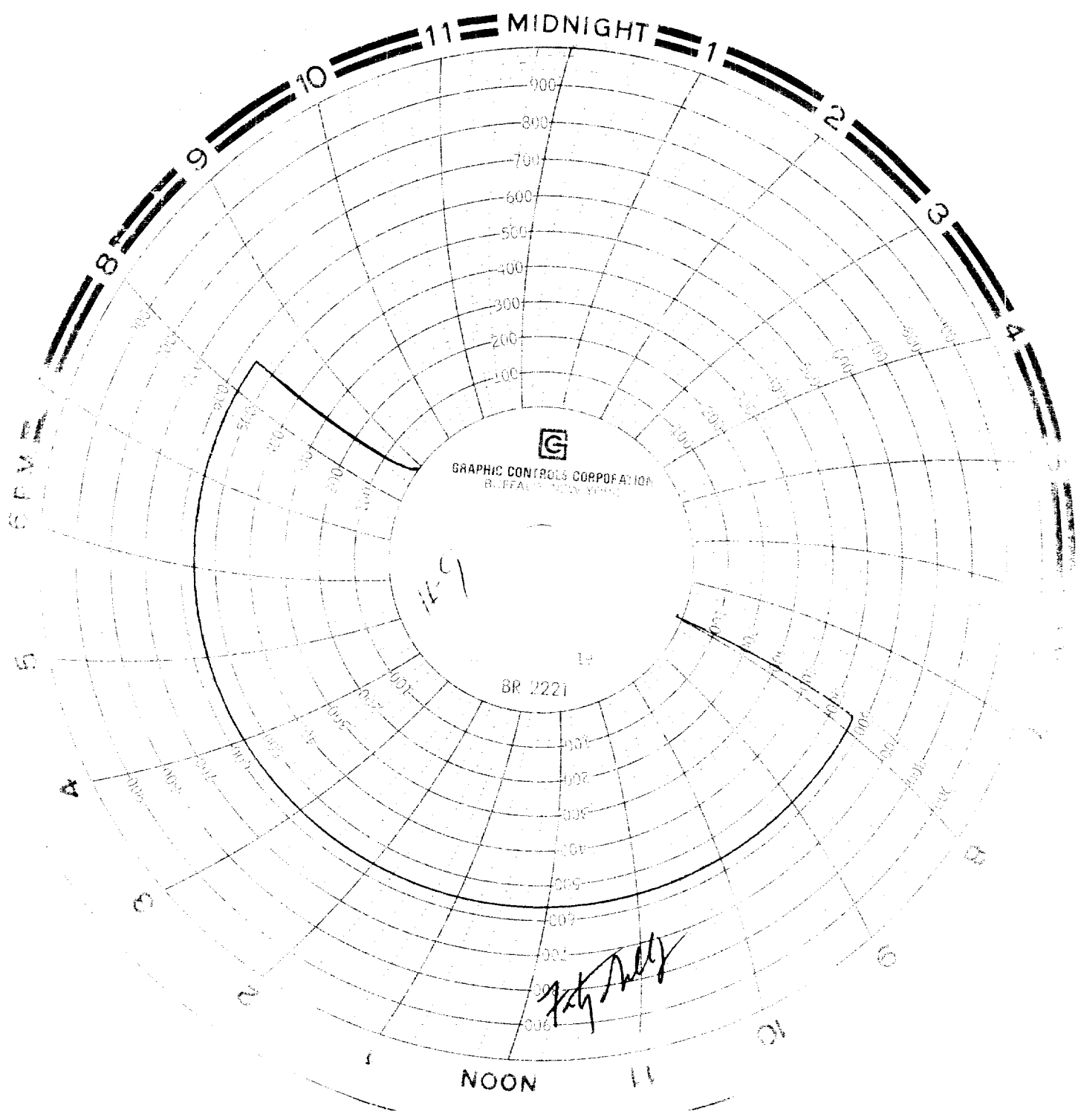
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Frosty Gillham* TITLE President DATE 6/26/02

Type or print name Frosty Gillham Telephone No. 915-550-0804  
 (This space for State use)

APPROVED BY *[Signature]* TITLE *Field Rep II* DATE JUL 2 2002

Conditions of approval, if any:



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

12-9

BR 2221

John Kelly