

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.

30-015-31557

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-4200

7. Lease Name or Unit Agreement Name:

Durango "15" State Com

8. Well No.

1

9. Pool name or Wildcat

Grayburg; Morrow

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-100) FOR SUCH PROPOSALS)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator

Louis Dreyfus Natural Gas Corp.

3. Address of Operator

14000 Quail Springs Parkway - Suite 600 - Oklahoma City, OK 73134

4. Well Location

Unit letter AS 660' feet from the North line and 660' feet from the West line.Section 15 Township 17S Range 29E NMPM Eddy County10. Elevation (Show whether DR, RKB, RT, Gr, etc.)
3564'

11. 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 COMPLETION ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐PLUG AND ABANDONMENT ☐CASING TEST AND CEMENT JOB ☐OTHER: Set CIBP & Perf. ☒

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 recompletion.

6/01/01 Verbal approval received from Phil Hawkins to Plug Back the Morrow and perf the Atoka.

6/07/01 Set CIBP @ 10,550, dumped 35' of cement on top. Perf'd Atoka from 10,286 - 10,291 4 spf. Determined to be uneconomical.

6/11/01 Verbal approval received from Mike Stubblefield to set CIBP @ 10,200 w/35' of cement on top and perf the Canyon f/9,225' - 9,242'. If this is not successful LDNG will set a CIBP @ 9,180 w/35' of cement on top and per the Cisco f/8,750 - 8770.

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

SIGNATURE Carla Christian TITLE Regulatory Technician DATE 06/11/01Type or print name Carla ChristianTelephone No. 405-749-5263

(This space for State use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM TITLE DISTRICT II SUPERVISORDATE JUN 19 2001

Conditions of approval, if any: