

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
June 19, 2008

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

WELL API NO. 30-031-20613
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. 306166
7. Lease Name or Unit Agreement Name HOSPAH SAND UNIT
8. Well Number 92
9. OGRID Number 256689
10. Pool name or Wildcat HOSPAH UPPER SAND

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
NACOGDOCHES OIL AND GAS, INC.

3. Address of Operator
P.O. BOX 632418, NACOGDOCHES, TX 75963

4. Well Location
Unit Letter O : 1850 feet from the SOUTH line and 700 feet from the EAST line
Section 36 Township 18N Range 9W NMPM County McKINLEY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6995' GR

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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: INJECTION WELL CLEANOUT ☒

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.

RIH with 1" tubing and tag sand. Wash sand out to casing TD. Pump 100 gallons of 7.5% HCL, displace with clean formation water. Circulate precipitants out of wellbore. Place well back for injection. Tubing and packer will not be altered during this procedure.

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 Michael Dehnisch TITLE VP of Operations DATE 7/28/29

Type or print name Michael Dehnisch E-mail address: mike.dehnisch@nogtx.com PHONE: 936-560-4747

For State Use Only

APPROVED BY: Kathy G. Roberts TITLE Deputy Oil & Gas Inspector, District #3 DATE AUG 04 2009

Conditions of Approval (if any): NOTIFY NMOC D AZTEC 24 HOURS PRIOR TO BEGINNING OPERATIONS