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

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

Form C-103
June 19, 2008

WELL API NO.
30-031-05213

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
306166

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.)

7. Lease Name or Unit Agreement Name
HOSPAH SAND UNIT

1. Type of Well: Oil Well ☒ Gas Well ☐ Other

8. Well Number
17

2. Name of Operator
NACOGDOCHES OIL AND GAS, INC.

9. OGRID Number
256689

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

10. Pool name or Wildcat
HOSPAH UPPER SAND

4. Well Location
Unit Letter N : 990 feet from the SOUTH line and 2310 feet from the WEST line
Section 36 Township 18N Range 9W NMPM County McKINLEY

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
7026' GL

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	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
DOWNHOLE COMMINGLE	☐						
OTHER:	☐			OTHER: SWABBING	☒		

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.

Subject well was swabbed on 7-10-09 and received 6 gallons of oil with 3 pulls 500'.

RCVD AUG 12 '09
OIL CONS. DIV.
DIST. 3

Provide form C-102 (plat) for this well

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 7/28/09

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

For State Use Only

APPROVED BY: ACCEPTED FOR RECORD TITLE DATE

Conditions of Approval (if any):