Office Engage A	state of New Mexico	Form C-103 October 13, 2009
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals and Natural Resources		WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 District III OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		30-045-34927 5. Indicate Type of Lease STATE ▼ FEE □
1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No. B10405-89
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 STATE COM 32 8. Well Number 2
1. Type of Well: Oil Well ☐ Gas Well ☒ Other 2. Name of Operator		9. OGRID Number
WEST LARGO CORP.		37197
3. Address of Operator 8801 S. Yale Ave., Suite 24	40 Tulsa, OK 74137-3535	10. Pool name or Wildcat Basin Fruitland Coal
4. Well Location		
Unit Letter D :785feet from the North line and 480 feet from the West line		
Section 32 Township 29N Range 9W NMPM San Juan County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	isnow wneiner DR, RKB, R1, GR, etc.) 70' GR 5778' RKB	
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 COMMENCE DRILLING OPNS P AND A DOWNHOLE COMMINGLE CASING/CEMENT JOB CASING/CEMENT J		
OTUED: Con Color		
OTHER: OTHER: First Delivery & Gas Sales I OTHER: First Delivery & Gas Sales I		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion:		
5/22/10 SICP = 250#. Enterprise installed of	electronic flow meter No. 88867. First	delivery into GANGELP3 gathering system
@ 1:00 PM. FTP = 104#, SICP = 208#, First 17 hrs production = 286 Mcf.		
		RCVD DEC 1'10 OIL CONS. DIV.
		DIST. 3
		erot. C
Spud Date: 2/2/2010	Rig Release Date: 2/25	12010
I hereby certify that the information above is true and	complete to the best of my knowledge	and belief
Thereby certify that the information doors that and	The state of the s	
SIGNATURE	TITLE President	DATE 11/24/2010
Type or print name John P. Garrett For State Use Only	E-mail address: jpgarrett@aol.com	PHONE:(918) 492-3239
APPROVED BY: Occopied For Rocor Conditions of Approval (if any):	<u>d</u> title	DATE
Conditions of Approval (if any):	1.	
	*C	