Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
District 1 ~ (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District 1 ~ (575) 710 1093 HOBBS OCD	Revised August 1, 2011 WELL API NO.
District II ~ (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-28407
District III - (505) 334-6178 E107 9 0 NM20 South St. Frangish Dt 6 2013	5. Indicate Type of Lease STATE FEE X
<u>District IV</u> – (505) 476-3460 Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM QOO SEBOH	6. State Oil & Gas Lease No. 309574
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	7. Lease Name or Unit Agreement Name Langlie Jal Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number 104
2. Name of Operator	9. OGRID Number
Resaca Operating Company 3. Address of Operator	263848 10. Pool name or Wildcat
1331 Lamar Street, Suite 1450 Flouston, TX 77010	Langlie Mattix: 7Rivers-Queen-Grayburg
4. Well Location	
Unit Letter M : 140 feet from the South line and 247 feet from the West line Section 32 Township 24S Range 37E NMPM Lea County	
Section 32 Township 24S Range 37E	
3230' 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: Extend TA Status of Well	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	
Resaca Operating Company respectfully requests an extension of TA status for this well for a period of Lycar.	
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 TITLE Engineer Assistant DATE 6/05/2013	
Type or print name Melanie Reyes E-mail address: melanie.reyes@resacaexploitation.com PHONE: (432) 580-8500	
For State Use Only	
APPROVED BY THE DISTURGE DATE-6-2013	
Conditions of Approval (if arry):	
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