

Submit To Appropriate District Office
 State Lease - 6 copies
 Fee Lease - 5 copies
 District I
 1625 N French Dr., Hobbs, NM 88240
 District II
 1301 W Grand Avenue, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

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State of New Mexico
 Energy, Minerals and Natural Resources
 Oil Conservation Division
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-105
 Revised June 10, 2003

WELL API NO.
30-005-29030

5. Indicate Type of Lease
 STATE FEE

State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a Type of Well
 OIL WELL GAS WELL DRY OTHER _____
 b Type of Completion
 NEW WORK DEEPEN PLUG DIFF
 WELL OVER BACK RESVR OTHER

7 Lease Name or Unit Agreement Name
Cato San Andres Unit

2 Name of Operator
Cano Petro of New Mexico, Inc.

8 Well No.
827

3. Address of Operator
**801 Cherry Street, Unit 25 Suite 3200
 Fort Worth, TX 76102**

9 Pool name or Wildcat
Cato; San Andres

4 Well Location
 Unit Letter **F** 1980 Feet From The **North** Line and **2037** Feet From The **WEST** Line

Section: **11** Township **08S** Range **30E** NMPM: **27** County **Chaves**

10 Date Spudded **10/08/08** 11 Date T.D Reached **10/15/08** 12 Date Compl (Ready to Prod) _____ 13. Elevations (DF& RKB, RT, GR, etc) **4130 (GL)** 14 Elev. Casinghead _____

15 Total Depth **1155'** 16 Plug Back T D **NA** 17. If Multiple Compl. How Many Zones? _____ 18. Intervals Drilled By _____ Rotary Tools _____ Cable Tools _____

19 Producing Interval(s), of this completion - Top, Bottom, Name _____ 20 Was Directional Survey Made No

21 Type Electric and Other Logs Run _____ 22 Was Well Cored No

23. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB /FT	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	1155'	12 1/4"	1100sx	

24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26 Perforation record (interval, size, and number) San Andres	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.	
	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

28. PRODUCTION

Date First Production _____		Production Method (<i>Flowing, gas lift, pumping - Size and type pump</i>) _____			Well Status (<i>Prod or Shut-in</i>) Shut-in		
Date of Test _____	Hours Tested 24 hrs.	Choke Size _____	Prod'n For Test Period _____	Oil - Bbl _____	Gas - MCF _____	Water - Bbl _____	Gas - Oil Ratio _____
Flow Tubing Press 0	Casing Pressure _____	Calculated 24-Hour Rate _____	Oil - Bbl _____	Gas - MCF _____	Water - Bbl _____	Oil Gravity - API - (<i>Corr</i>) _____	

29 Disposition of Gas (*Sold, used for fuel, vented, etc.*) _____ Test Witnessed By _____

30 List Attachments _____

31
 Signature *Cindy Chavez* Printed Name **Cindy Chavez** Title: **Regulatory Coordinator**
 E-mail Address: **cindy@canopetro.com** Date: **11/18/09**

