<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240

State of New Mexico

Form C-103 August 1, 2011

Phone:(575) 393-6161 Fax:(575) 393-0720 **Energy, Minerals and Natural** District II Permit 160374 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 Resources WELL API NUMBER District III 1000 Rio Brazos Rd., Aztec, NM 87410 30-025-40686 Oil Conservation Division 5. Indicate Type of Lease Phone:(505) 334-6178 Fax:(505) 334-6170 1220 S. St Francis Dr. District IV P 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462 Santa Fe, NM 87505 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO OSO NEGRO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 8. Well Number 001 1. Type of Well:O 9. OGRID Number 2. Name of Operator MOREXCO INC 3. Address of Operator 10. Pool name or Wildcat P. O. BOX 51208, MIDLAND, TX 79710 4. Well Location Unit Letter C feet from the 1980 660 N line and feet from the line Township 188 Range 13 38E NMPM Lea County 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3629 GR Pit or Below-grade Tank Application or Closure Pit Type ______ Depth to Groundwater____ Distance from nearest fiesh water well _____ Distance from nearest surface water_ mil Below-Grade Tank: Volume bbls; Construction Material Pit Liner Thickness: 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 ☐ ALTER CASING TEMPORARILY ABANDON

CHANGE OF PLANS

COMMENCE DRILLING OPNS.

PLUG AND ABANDON PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMENT JOB X Other: Spud 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. 12/13/2012 Spudded well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines \square , a general permit \square or an (attached) alternative OCD-approved plan \square . SIGNATURE Electronically Signed TITLE Manager DATE 2/12/2013 Type or print name Rhonda Becker E-mail address morexco@earthlink.net Telephone No. 505-627-1290 For State Use Only: APPROVED BY: Paul Kautz TITLE Geologist DATE 2/13/2013