Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103		
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.		
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-053-20040	CL	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Type STATE		
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505		6. State Oil & Gas Lease No.		
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 Black Butte		
PROPOSALS.)  1. Type of Well: Oil Well □ Gas Well □ Other: Wildcat			8. Well Number 1		
2. Name of Operator			9. OGRID Number		
3. Address of Operator c/o Walsh Engineering 1615 E. Warner Rd. #4, Tempe, AZ 85284			10. Pool name or Wildcat Wildcat		
4. Well Location: N34 25' 25.0":					
			_feet from theline  NMPM Socorro County		
Section 6	corro County				
Charles Commission of the Comm	11. Elevation (Show whether DI 5136' GR		, 		
12. Check A	Appropriate Box to Indicate N	Nature of Notice,	Report or Other	Data	
NOTICE OF IN	TENTION TO:	SUB	SEQUENT RE	PORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	K 🗆	ALTERING CASING		
TEMPORARILY ABANDON  PULL OR ALTER CASING	CHANGE PLANS   COMMENCE DRI  MULTIPLE COMPL   CASING/CEMEN			P AND A	
DOWNHOLE COMMINGLE	WIOLTIFEE CONFE [	CASING/CLIVICIN	1 306		
OTHER:		OTHER:		Spud D	
13. Describe proposed or comp	leted operations. (Clearly state all	pertinent details, and		es, including estimated	date
of starting any proposed wo or recompletion.	rk). SEE RULE 1103. For Multip	ole Completions: At	tach wellbore diagra	am of proposed comple	tion
	g/liner to 1000psi, held 30min,				ran
	1/05/10. Perforated 7" & 4-1/			0'-60'; 2764'-76';	
3080 -3120"; 3280"-3308	3' & 3468'-86' at 1 SPF, total of	f 114 holes (EHD=	.40", EPD=42").		
2/03/10 - 2/11/10: Tested ea	ch perforated interval by swabb	ing samples. Shut	in well. Evaluating	ng swab results.	
				2000年	
				CEB CE	
12/20/09		1/09/10		RECEIVED OCI	
Smud Data	р:, р.1 г	\		ر ا	
Spud Date: Rig Release Date:			1	23 E	
I hereby certify that the information a	above is true and complete to the b	est of my knowledge	and belief.		
SIGNATURE Jay M	TITLE MAN	462R	DATE	2/16/10	
Type or print name JAY KENTE	KA F-mail address: TA	w Kenteraba		e-831-5^8 <b>8</b> 0	
For State Use Only	L-man address	7 11011-412-1	I HONE. <u></u>	22.0000	
APPROVED BY:	TITLE DI	STRICT SUPE	ERVISOR 5.	TE 2/22 /24	

APPROVED BY: /// /// Conditions of Approval (if any):