Office Office	State of New Me	X1CO		Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natu	ral Resources		Revised August 1, 2011
1625 N French Dr , Hobbs, NM 88240			WELL API NO.	
<u>District II</u> – (575) 748-1283			30-015-20254	
<u>District III</u> – (505) 334-6178	11 5 That at, Artesia, INVI 60210		5. Indicate Type of	
1000 Rio Brazos Rd , Aztec, NM 87410	Tto NIM 87410		STATE [	FEE
District IV – (505) 476-3460	Santa Fe, NM 87	505	6. State Oil & Gas	s Lease No.
1220 S St. Francis Dr., Santa Fe, NM				
87505				
1	AND REPORTS ON WELLS			Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS			East Shugart Unit	
DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS)	IN FOR PERMIT" (FORM C-101) FC	OR SUCH		
1. Type of Well: Oil Well Gas Well X Other		8. Well Number # 32		
		9. OGRID Number		
2. Name of Operator			9. OGRID Number	
Americo Energy Resources, LLC.			10. 2. 1	
3. Address of Operator		10. Pool name or Wildcat		
7575 San Felipe STE 200 Houston TX 77063				
4. Well Location				
Unit Letter: B: 100' feet	t from the FSL line ar	nd 900' feet from	the FWL line	,
Section 35	Township 18S	Range	31E NMPM	County EDDY
	. Elevation (Show whether DR,	RKB, RT, GR, etc		
GL	. 3623°			
12 Check Appr	opriate Box to Indicate N	ature of Notice	Report or Other	Data
	, p		, response of ourer.	
NOTICE OF INTER	NTION TO:	SUE	SEQUENT REF	PORT OF:
PERFORM REMEDIAL WORK X PLUG AND ABANDON ☐ REMEDIAL WOR				ALTERING CASING
	IANGE PLANS	•		P AND A
	JLTIPLE COMPL	CASING/CEMEN		- ///N
	DETIFEE COMPE	CASING/CEMEN	11 306	
DOWNHOLE COMMINGLE				
OTHER:		OTHER.		
	anaustiana (Classic state all s	OTHER:		
13. Describe proposed or completed				
of starting any proposed work).		. For Multiple Co	empletions: Attach w	ellbore diagram of
proposed completion or recompl	etion.			
				•
Move in equipment on 4/22/2012. Rig up				
near well bore. Then treat the current set		ns of 15% NEFE a	icid. Leave well shut	in for 24 hours. Return
well to active injection after clean up and	treatment.			
				DECEIVED
				RECEIVED
				100 00 2012
				APR <b>20</b> 2012
Spud Date:	Rig Release Da	ite:		
				INMOCD ARTESIA
I house your if that the information show	a is two and complete to the ba			
I hereby certify that the information above	e is true and complete to the be	est of my knowledg	ge and belief.	
300 Jan 1561				
SIGNATURE	TITLE: Operat	tions Manager	DAT	ΓE 4/18/2012
	-			
Type or print name: E-mail address: gle	nn.bertrand@americoenergy.c	om PHONE: 713	-984-9700	
For State Use Only	·	_		
TWI halo	$\sim$	- TDS ~~		. ( )
APPROVED BY:	TITLE しって	PS you	UST DAT	TE 04/24/12
Conditions of Approval (if any):		0		