Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	Revised August 1, 2011
District II - (575) 748-1283		DIVISION	30-015-01774	
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	311 3. 1 list St., Altesia, (114 60210		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505			STATE FEE 6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		•	E-1285	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO PROPOSALS.)		UG BACK TO A	7. Lease Name or Unit Agreement Name FEATHERSTONE STATE	
1. Type of Well: Oil Well Gas Well Other			8. Well Number 5	
Name of Operator ALAMO PERMIAN RESOURCES LLC			9. OGRID Number 274841	
3. Address of Operator 415 W. WALL ST., SUITE 500 MIDLAND		D, TX 79701	10. Pool name or Wildcat ARTESIA; Q-G-SA	
4. Well Location			_	
	from the \underline{N} line and $\underline{2310}$ feet from the			
Section <u>2</u>	Township 18S		28E NMPM	County <u>EDDY</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12. Check	Appropriate Box to Indicate N	ature of Notice	, Report or Other Dat	a
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO			RK 🗌 ALT	ERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				ND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMEN	IT JOB	
OTHER:	ge	OTHER:		
	leted operations. (Clearly state all p			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
	•		75	CEIVED
Name change from Featherstone State 005 to Featherstone State E 005				Y 14 2012
NAME OF THE PARTY				
Property code 38879 eff 5-1-12 NMOCD ARTESIA				
Property Code So				
• 0	<i>V</i> •			
0.15.	n: n. n			
Spud Date:	Rig Release Da	ite:		
I hereby certify that the information	above is true and complete to the be	est of my knowled	ge and belief.	
1 1	/ -			
SIGNATURE (an FC	λ			
	TITLE Regula	tory Affairs Coord	<u>inator</u> DATE <u>05/10/2012</u>	2
Type or print name Tom Fulvi E-m For State Use Only				2 / /
For State Use Only APPROVED BY:				5/15/2012
For State Use Only	ail address: tfulvi@alamoresources		32 897 0673 —	5/15/2012