Office Office		tate of New Me				C-103	
District I - (575) 393-6161	Energy, M	inerals and Nati	ıral Resources	TITET T A TOTAL	Revised Augus		
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283				WELL API N	NO. 30-023-2001	ρ	
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of Lease			
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410		South St. Fra		STAT			
<u>District IV</u> – (505) 476-3460	S	anta Fe, NM 8	/505	i i	& Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505					224		
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 PROPOSALS.)				7. Lease Name or Unit Agreement Name  Big Hatchet North Unit 25 State  8. Well Number 1			
1. Type of Well: Oil Well Gas Well X Other					L L		
2. Name of Operator Dan A. Hughes Company, L. P.					9. OGRID Number <b>251054</b>		
3. Address of Operator P. O. Box 669, 208 E. Houston St., Beeville, TX 78104-0669				10. Pool name or Wildcat  Percha Shale			
4. Well Location							
Unit Letter G:		om the N.º	line and		t from the E	line	
Section 25			ange 17W	NMPM	County <b>Hidal</b>	go	
	a II. Elevation (I	3how whether DR 4494.321	, RKB, RT, GR, etc <b>GR</b>	c.)			
10 (1)	A	4. Y. H 4. N	CNI-4'	<b>D</b> O.	1 D		
	Appropriate Bo						
NOTICE OF INTENTION TO: SUB PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					REPORT OF:  ALTERING CASI		
TEMPORARILY ABANDON				_			
PULL OR ALTER CASING	MULTIPLE CO		CASING/CEME	_			
DOWNHOLE COMMINGLE							
OTHER:			OTHER:				
13. Describe proposed or comp							
of starting any proposed w proposed completion or rec		19.15.7.14 NMA	J. For Multiple Co	ompletions: Atta	ich wellbore diagram o	ot ·	
proposed completion of re-	, om pronon.				•		
11/2/2012 Well shut i	n for 19 day	ys. Tidwell	drove to lo	cation. Dril	lled from 16' to	o 18¹	
					DEOCIVI		
					RECEIV		
					NOV 1 9 20	112	
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			•		NMOCD ART	ESIA	
-					·		
Spud Date: 5/26/201	2	Rig Release Da	ate:				
			<u> </u>				
I hereby certify that the information	above is rue and	complete to the b	est of my knowled	lge and belief.			
, , , ,	SIX	_					
SIGNATURE /	7 4	TITLE O	perations Ma	anager	DATE 11/14/2	012	
Type or print nameJeffery	R. Ilseng	E-mail addres	s: jeffi@dahu	ighes net	PHONE: 361/35	8-3752	
For State Use Only			<del></del>		·		
APPROVED BY:	de	TITLE Dis	TH Superis	2	DATE 11/20/2018	<del>}</del>	
Conditions of Approval (if any):							