Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		WELL API NO. ⁻ 30-023-20016
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	1220 South St. Francis Dr.	STATE X FEE
District IV - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		39224
	ES 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 A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		
PROPOSALS.)		Big Hatchet North Unit 25 State
1. Type of Well: Oil Well 🗌 Gas Well 🔀 Other		8. Well Number 001
2. Name of Operator	uchos Company I P	9. OGRID Number
Dan A. Hughes Company, L.P. 3. Address of Operator		<u>251054</u>
-	n St., Beeville, TX 78104-0669	Percha Shale
4. Well Location		i ci cita shale
Unit LetterG	660 feet from the North line and	4620 feet from the East line
Section 25	Township 30S Range 17W	NMPM County Hidalgo
	11. Elevation (Show whether DR, RKB, RT, GR,	
	4494.32' GR	
12. Check Ap	propriate Box to Indicate Nature of Noti	ice, Report or Other Data
NOTICE OF INT		UBSEQUENT REPORT OF:
	PLUG AND ABANDON REMEDIAL W	
		DRILLING OPNS. X P AND A
	MULTIPLE COMPL CASING/CEN	
	·	· · · · · · · · · · · · · · · · · · ·
CLOSED-LOOP SYSTEM		_
OTHER:		
	c). SEE RULE 19.15.7.14 NMAC. For Multiple	s, and give pertinent dates, including estimated date
proposed completion or recor		Completional Attach wendere diagram of
$\frac{1}{8}/\frac{1}{4}/2014$ Well shut in for	19 days. Tidwell drove to loca	tion. Drilled from 80' to 82'.
67472014 Men Shat in Ior		
		·
		NM OIL CONSERVATION
		ARTESIA DISTRICT
		AUG 19 2014
·····		
Spud Date: 5/26/201	2 Rig Release Date:	RECEIVED
		-
I hereby certify that the information al	pove is true and complete to the best of my know	ledge and belief.
had the	TITLE Operations M	Manager DATE 8/13/2014
SIGNATURE / VALI (MAPN		DATE 071572014
Type or print name Wade Chap	man E-mail address: wchapman	Odahughes.net PHONE: 361/358-3752
For State Use Only		
Accepted to	r record	DATE 8-19-14
APPROVED BY:	DTITLE	DATE
Conditions of Approval (if any):		
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