Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103		
District I	Energy, Minerals and Antural Resources		Feb 7, 2007		
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO.	30-015-05613	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE	FEE Federal	
District IV	Santa Fe, NM 87505		6. State Oil & G		
1220 S. St. Francis Dr., Santa Fe, NM 87505					
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name of	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.)			EAST SHUGAI	RT UNIT	
1. Type of Well: Oil Well Gas Well Other -Injection well			8. Well Number	1	
2. Name of Operator	Name of Operator			OGRID Number	
	co Energy Resources, LLC	MAR 2 0 2007		228051	
3. Address of Operator	TV 77062	OCD - ARTESA AM	10. Pool name o		
7575 San Felipe, Suite 200, Housto	m, 1X //063	VAN JOSE	Shugart (Y-SI	(-QN-GB)	
4. Well Location					
Unit Letter P: 230 feet from the South line and 330 feet from the East line					
Section 27	Township 18 South Rang		NMPM Edd	y County	
表式接上的线。2015年	11. Elevation (Show whether DR,	, RKB, RT, GR, etc.)			
Pit or Below-grade Tank Application	GL 3638			113042111434	
		. 4 Di-4	6	Contraction of the Contraction o	
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water					
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF IN		SUB	SEQUENT RE	PORT OF:	
PERFORM REMEDIAL WORK	PLUGIAND ABANDON [REMEDIAL WORK		ALTERING CASING	
TEMPORARILLO TABLETO DE LA COMPONICIO DEL COMPONICIO DE LA COMPONICIO DEL COMPONICIO DELICIO DELIC	I COL TAMOS INDIANA	COMMENCE DRII		P AND A	
PULL OR ALTER ASING 3-7	MULTIPLE COMPL	CASING/CEMENT	JOB []		
OTHER:	UBP -	OTHER: Te	mporarily Abandor	n 🔲	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date					
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion					
or re-completion. Subsequent work:					
- Informed "OCD"					
	od service rig to well location.				
- Re-build well location. MIRU vacuum truck, flowed well, & recovered 85 bbl of fluid. Shut well in. SITP=1200					
- MIRU IW kill pump, displaced 80 bbl of brine water down tubing .shut in tubing pressure 1200 psi.					
 Checked casing annulus no pressure. Rigged up IW kill pump, Tested casing 520 psi held OK. Installed pressure recorder. Tested casing 520 psi for 30 minutes, held OK. 					
	pressure and moved off location. I		••		
Blod do wa cubing	problem and moved on recurrent.	sere emoring open.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .					
grade tank has been/will be constructed or	closed according to NMOCD guidelines	_], a general permit [_] ∈	or an (attached) alter	native OCD-approved plan ∐.	
SIGNATURE about	TITLE_I	and Manager	DATE 3/15/	67	
Type or print name Robert M. Gray E-mail address: don.gray@americoenergy.com Telephone No. 713-984-9700					
For State Use Only					
A	Dun	Genv'Gu	ive		
APPROVED BY: / O ELLE	TITLE	Deputy Field In	¥ 7	DATE AND A 2007	
Conditions of Approval (if any):	,	District II - A	•	MAK ZU ZUUI	
· /					

