

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.,
Santa Fe, NM 87505

WELL API NO. 30-015-35260
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Orleans 25
8. Well Number #1
9. OGRID Number 243542
10. Pool name or Wildcat Four Mile Draw : Morrow (Gas)

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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Corkran Energy, LP	JUN 18 2007
3. Address of Operator 2219 Westlake Drive Suite 120 Austin, TX 78746	OCD-ARTESIA
4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>North</u> line and <u>1650</u> feet from the <u>East</u> line Section <u>25</u> Township <u>18S</u> Range <u>26E</u> NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3280'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
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 INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>
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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 recompletion.

CORRECTED REPORT

3-25-07 13 3/4" 54.50# J-55 set at 424', 575 sxs "C" + 2%CaCl + 25# celloflake, 530 psi compressive strength in 8 hrs, temp survey, TOC @ 25', fill to surface w/ redi-mix (Per Jerry @ OCD), TOC @ surface and WOC 34 1/2 hrs. , test csg to 1000# for 30 min.

3-28-07 9 5/8" 40# J-55 set at 1362', lead- 550 sxs 50/50 "C" + 5% salt + 1/4# celloflake + 5#ps LCM-1 and tail- 200 sxs "C" + 2% CaCl, 600 psi compressive strength in 8 hrs, circ 79 sxs cmt, WOC 13 1/2 hrs. , test csg to 1000# for 30 min., TOC surface

4-02-04 5 1/2" 17# N-80 set at 9616', lead- 250 sx 50/50 "H" + 3% FL52A + 2% JMS + 5% salt + 25# C/F + 3# LCM1, tail- 1350 sx 50/50 "H" + 5% FL52A + 2% SMS + 5% salt + 5% FL25 + 3% LCM1 , bump plug, test csg to 2535# , float & casing held okay.

Lead cmt volume= 250 sx x 2.45 ft³/sk = 613 ft³

Tail cmt volume = 1330 sx x 1.30 ft³/sk = 1755 ft³

Total cmt volume = 2368 ft³ Calc TOC = 3700 per open hole log

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Angela Lightner TITLE Consultant DATE 6-15-2007

Type or print name Angela Lightner

E-mail address: angela@rkford.com

Telephone No. 432-682-0440

For State Use Only

FOR RECORDS ONLY

JUN 25 2007

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):