FFR 2 4 7009 Form C-10 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources May 27, 2004 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 District II 30-005-62253 OIL CONSERVATION DIVISION 1301 W Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE FEE 🖸 1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 305985 SUNDRY NOTICES 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 C X Plains DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator 9. OGRID Number Enervest Operating, L.L.C. 143199 3. Address of Operator 10. Pool name or Wildcat 1001 Fannin Street, Suite 800 Houston, Tx 77002 Race Track; San Andres 4. Well Location Unit Letter ____ J __ :__ 1650 ___ feet from the 2310 South line and __ feet from the_ line Township 10S Range 28E **NMPM** Chaves 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3758.3 GR Pit or Below-grade Tank Application or Closure Pit type _____ Depth to Groundwater _ _____ Distance from nearest fresh water well _____ Distance from nearest surface water ____ Pit Liner Thickness: _ Below-Grade Tank: Volume_____bbls: Construction Material _ 12. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON [REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT PULL OR ALTER CASING MULTIPLE** CASING TEST AND

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.

CEMENT JOB

Turn well to Production

OTHER:

X

Test well on 8-01-08, 1.0 BO, 0 Gas, 0 Water

COMPLETION

OTHER:

Turn well to production 8-01-08.					
hereby certify that the information above is true and complete t					
grade tank has been/will be constructed or closed according to NMOCD gui	idelines	, a general permit	or an (attach	ed) alternative OCI	D-approved plan []
SIGNATURE Shully South	_ TITLE	Sr. Re	eg. Tech	DATE	2/20/09
<i>/ / / / / / / / / /</i>	E-mail ac	ddress:	sgalik@ene	rvest.net	
Type or print name Shirley Galik			_	Telephone No.	(713) 495–1514
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For State Use Only			1 ()	_	210.01-0
APPROVED BY / /9 COLUMN ALON	_ TITLE_	Darct	11 120000	DATE C	1125109
Conditions of Approval, if any:			0	,	, , ,
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