Submit 1 Copy To Appropriate District Office	State of New Mexico			Form C-103		
District I	Energy, Minerals	and Nati	ural Resources	WELL API NO.	October 13, 20	<u>109<b>/</b>\</u>
1625 N French Dr , Hobbs, NM 88240 District II				30-015-01299		
1301 W. Grand Ave , Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type	of Lease	_
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE		
District IV Santa Fe, NW 87303				6. State Oil & G	as Lease No.	
1220 S. St Francis Dr, Santa Fe, NM 87505				E-9510		
SUNDRY NO	TICES AND REPORTS OF				or Unit Agreement Name	;
(DO NOT USE THIS FORM FOR PROP	OSALS TO DRILL OR TO DEED	PEN OR PL	UG BACK TO A	EAST RED LAK	KE UNIT	
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR USE "APPL PROPOSALS)	ACATION FOR FERMIT (FOR	HE	の別人とり	0. 11.11.211	0001/	
1. Type of Well: Oil Well	Gas Well  Other	Λ.	PR <b>2 6</b> 2010	8. Well Number		
2. Name of Operator			K & 0 ZUIU	9. OGRID Num	ber	
TANDEM ENERGY CORPORATION  3. Address of Operator			CD ARTESIA	236183 10. Pool name or Wildcat		
11490 WESTHEIMER RD, STE. 1000 HOUSTON, TX 770			OB AITTEOIA	RED LAKE; QUEEN-GRAYBURG, EAST		ST
4. Well Location						_
	feet from theNORTH	1	ine and 1650	feet from the	WEST line	
Section 1		ange			County	
Section	11. Elevation (Show wh				County	
12. Check	Appropriate Box to In	dicate N	Nature of Notice,	Report or Other	Data	
NOTICE OF I	NITENITION TO		CLID	CEOUENT DE	ים חדים	
				SEQUENT RE	:PURT OF: ALTERING CASING [	٦
<del></del>			LLING OPNS.		 3	
PULL OR ALTER CASING			CASING/CEMEN	<del></del>	7,110,71	<b>4</b>
DOWNHOLE COMMINGLE						
					_	_
OTHER:			OTHER:	d ~i		<u> </u>
13. Describe proposed or com	operations. (Clearly work). SEE RULE 19.15.7.					iate
proposed completion or re		14 INIVIA	c. To Munipic Cor	inpictions. Attach	welloofe diagram of	
1 1	1					
2/23/10 RIH WITH CIBP SET @ 1598	3' - RIH CIRCULATE PLUGGIN	IG MUD -	SPOT 25 SACKS ON T	OP		
2/23/10 PERF @ 675' – PUMP 35 SA		.005	0. 0. 20 0. 0. 0. 0	<b>.</b>		
2/24/10 PERF @ 378' - PUMP 35 SA						
2/24/10 PERF @ 235' CIRCULATE 6	0 SACKS SURFACE					
CUT OFF WELL HEAD AN ANCHOR:	S - INSTALL PA MARKER - LE	VEL LOC	ATION			
1						
C ID	7		,			
Spud Date:	Rig F	Release D	ate:			
				-		
I hereby certify that the information	nAhove is true and complet	e to the h	est of my knowledge	e and helief		
Thereby certify that the information	Jabove is true and complete	e to the t	csi of my knowledge	e and benef.		
Wh. VIL					. / 24 0/	a / A
SIGNATURE!	TITI	.Е <u></u>	right	D	ATE 4-03-06	5/0
Type or print name Mark H	noV: - s Day	ماططسمه	amarV@ are	a mense n. Ar	ATE 4-23-26 HONE: 432-586-	9011
For State Use Only	<u> </u>	an addres	silver the may	ynairs, nep	1UNE: 732-356-	<u> </u>
1 Since 250 Sint // // //	-0				,	
APPROVED BY:	k TITL		oved for plugging of well		TE 4/26/20	10
Conditions of Approval (if any):		Habi	lity under bond is retaine 103 (Subsequent Report	ed pending receipt	/ /	
		which	h may be found at OCD V	Veb Page under		
		Form	s, www.cmnrd.state.nm.u	s/oed.		