Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II			30-023-20014
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE
District IV Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM		6. State Oil & Gas Lease No.	
87505			
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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Big Hatchet North Unit 14 State
PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other		8. Well Number 001	
2. Name of Operator			9. OGRID Number 251054
Dan A. Hughes Company, L. P. 3. Address of Operator			10. Pool name or Wildcat
P.O. Drawer 669, 208 E. Houston St., Beeville, TX 78104-0669			Wildcat, Percha Shale
4. Well Location			
Unit Letter : 1545.11 feet from the North line and 2025.39 feet from the East line			
Section 14 Township 30S Range 17W NMPM County HidAlgo			
	11. Elevation (Show whether DR)		
4440.72' GR			
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			
TEMPORARILY ABANDON			—
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			「JOB □
DOWNHOLE COMMINGLE			
OTHER:	П	OTHER:	П
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.			
8/31/2010 Well shutin for 19 days. Tidwell drove to location & cable tooled from 48' to 50'			
			RECEIVED
•			ILOLIVED
			SEP 17 2010
			1114000 10000
			NMOCD ARTESIA
			
Spud Date: 5/29/2009	Rig Release Da	ate:	
		215W1_21_21_	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE / House	TITLE O	perations Man	ager DATE 9/15/2010
Type or print name / Jeffery R. Ilseng E-mail address: jeffi@dahughes.net PHONE: 361/358-3752 For State Use Only			
APPROVED BY: (if any):	TITLE COM	MIGHICH OFFI	
Conditions of Approval (II ally).			OK