Office	State of New Me			Form C-103
District I	Energy, Minerals and Natu	ıral Resources		October 13, 2009
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	District II 1301 W Grand Ave. Artesia NM 88210 OIL CONSERVATION DIVISION		30-005-60596	
District III 1220 South St. Francis Dr.		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410		STATE FEE X		
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505		6. State Oil & Gas Lease No. 308697	
87505 SUNDRY NOTIC	ES AND REPORTS ON WELLS	1	7. Lease Name or Unit Agree	ment 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			TWIN LAKES SAN ANDRES	
PROPOSALS.)			8. Well Number 6	
1. Type of Well: Oil Well Gas Well Other X INJECTION			0.0000000	
2. Name of Operator			9. OGRID Number	
Canyon E&P Company			269864	
3. Address of Operator 911 Lake Carolyn Pkwy, Suite 104 Irving, TX 75039			10. Pool name or Wildcat TWIN LAKES SAN ANDRES UNIT	
4. Well Location			TASSER	
	eet from the <u>SOUTH</u> lin	ne and <u>1650</u>	feet from the WEST	_line
Section 30	Township 8S Ran	ge 29E 1	NMPM CHAVES Cou	nty
	11. Elevation (Show whether DR,	, RKB, RT, GR, etc	·.)	
12. Check Ap	propriate Box to Indicate N	ature of Notice	, Report or Other Data	
NOTICE OF INT	SEQUENT REPORT OF	= :		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				CASING
TEMPORARILY ABANDON			$\bar{\Box}$	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN				
DOWNHOLE COMMINGLE				
DOMINIOLE GOMININGLE				
OTHER:		OTHER: MIT		
13. Describe proposed or complet	ed operations. (Clearly state all		nd give pertinent dates, including	estimated date
). SEE RULE 19.15.7.14 NMAC			
proposed completion or recon		ı	1	,
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12-05-10	RAN MIT, RETURNED V	VELL TO WATER	R INJECTION.	
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			ARTESI	AJ
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Spud Date:	Rig Release Da	ite:		
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I hereby certify that the information ab	ove is true and complete to the be	est of my knowled	ge and belief.	
SIGNATURE	TITLE P	resident	DATE <u>12-08-10</u>	
Type or print name J. Michael Myers E-mail address: mike@canyonep.com PHONE: 972-869-8005				
For State Use Only	E-man address	<u>iiike@caiiyon</u>	р <u>.сош</u> т помь. <u>_7/2-009-0003</u>	
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Conditions of Approval (if any):				