Submit 3 Copies To Appropriate District  State of New Mo	1.00
Office Energy, Minerals and Natu 1625 N. French Dr., Hobbs, NM 87240	Iral Resources June 19, 2008 WELL API NO.
District II 1301 W. Grand Ave. Artesia, NM 88210 OIL CONSERVATION	1 F 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
District III 1220 South St. Fra	
District IV	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	o. State on & das Ecase No.
SUNDRY NOTICES AND REPORTS ON WEI (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-10 PROPOSALS.)	OR PLUG BACK TO A South Boyd 27 Com
1. Type of Well: Oil Well ☑ Gas Well ☐ Other	8. Well Number 4 ~
2. Name of Operator	9. OGRID Number
Nearburg Producing Company ✓  3. Address of Operator	10. Pool name or Wildcat
3300 N A St., Bldg 2, Ste 120, Midland, TX 79705	Dagger Draw; Upper Penn, North
4. Well Location	
Unit Letter L: 1980 feet from the Sou	uth line and 660 feet from the West line
	Range 25E NMPM Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3461	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
12. Check rippropriate Box to material	ratare of rouse, report, or other bata
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING	CASING/CEMENT JOB
DOWNHOLE COMMINGLE	
OTHER:	OTHER: MIT- TA Wellbore
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.	
2-7-11 Notify OCD of MIT Schedule. 2-10-11 Mr. Richard Inge, OCD on location. MIRU kill truck. Load w/ 8 bbls. Pressured up to 520# - lost 40# in 30 mins. Test ok.	
Mr. Richard Inge on location and retained original chart.	
FINAL T/A EXTENSION  Date of Last Production	7/1/2m2 FEB 14 2011
. Well must be returned to be	neficial use or a NMOCD ARTESIA
Spud Date: P/A plan submitted prior to 2/13/2012	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TIT	LE Production Analyst DATE 2-11-11
	tstathem@nearburg.com nail address: PHONE 432 818 2950
APPROVED BY RUHAND WAS TITLE COMPLIANCE OFFICER DATE 2/15/11	
Conditions of Approval (if any):	

