

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-40712
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Puckett North
8. Well Number #16
9. OGRID Number 025111
10. Pool name or Wildcat Maljamar/Grayburg/San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

SUNDRY NOTICES AND REPORTS ON WELLS
 (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 PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Hudson Oil Company of Texas

3. Address of Operator
616 Texas Street, Ft. Worth, TX

4. Well Location
 Unit Letter H : 1980 feet from the North line and 660 feet from the East line
 Section 13 Township 17S Range 31E NMPM Eddy County, NM

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

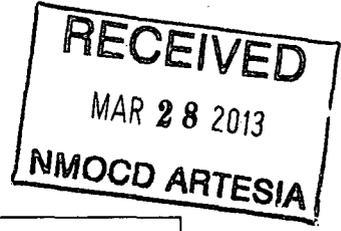
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10/8/12 Ran 8.625" 24# J-55 STC 8 RD Csg to 820'

10/8/12 Cement Csg with 200 SX Premium Plus 4% and 250 SX Premium Plus 2%, circ 112 SX to surface

10/8/12 Test csg to 1000 PSI for 30 minutes, test OK.



Spud Date: 10/8/12

Rig Release Date: 10/14/12

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE E. Randall Hudson III TITLE President DATE March 26, 2013

Type or print name E. Randall Hudson III E-mail address: rhudson@hudsonoil.com PHONE: (817) 336-7109

For State Use Only
 APPROVED BY: T. C. Shuman TITLE Geologist DATE 3/25/2013
 Conditions of Approval (if any):