Submit 3 Copies To Appropriate District Office	State of New			Form C-103
District I	Energy, Minerals and	Natural Resources	WELL API NO.	Feb 7, 2007
1625 N. French Dr., Hobbs, NM 88240 District II			30-015-05685	
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St.		STATE FEE	🛛 Federal
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, N	WI 87505	6. State Oil & Gas Lease No	
87505 SUNDRY NOT	TICES AND REPORTS ON W	ELLS	7. Lease Name or Unit Agree	ement Name
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)	OSALS TO DRILL OR TO DEEPEN (	OR PLUG BACK TO A	EAST SHUGART UNIT	
1. Type of Well: Oil Well	Gas Well 🛛 Other –Inject	ion well	8. Well Number # 029	
2. Name of Operator Amer	ico Energy Resources, LLC	Horth Barth Hort	9. OGRID Number 228051	
3. Address of Operator		FEB WIE	10. Pool name or Wildcat	
7575 San Felipe, Suite 200, Houst	ton, TX 77063		Shugart (Y-SR-QN-GB)	
4. Wen Ebeation				
Unit Letter N: 330 feet from the South line and 2310 feet from the West line				
Section 34	Township 18 South	Range 31 East	NMPM Eddy	County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3610 CTF				
Pit or Below-grade Tank Application 🗍 or Closure 🗌				
Pit typeDepth to Groundy	waterDistance from nearest f	resh water well Dist	ance from nearest surface water	<u> </u>
Pit Liner Thickness: mi	Below-Grade Tank: Volume	bbls; Co	nstruction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF I	NTENTION TO:	SUB	SEQUENT REPORT OF	=:
PERFORM REMEDIAL WORK				
PULL OR ALTER CASING		CASING/CEMENT	ГЈОВ 🗌	
OTHER:		OTHER:		
13. Describe proposed or com				
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or re-completion. Notice of Intention to Remedial Work:				
- Inform "OCD" 505-748-1283 EXT 102 165				
- MIRU service rig, kill well, N/D tree, N/U bop's.				
- Release AD-1 packer, and pooh with 2-3/8" tubing. Re-dress/exchange packer.				
<ul> <li>GIH with packer, testing 2-3/8" in hole. Remove BOP's, and set packer at 2644 as before.</li> <li>Inform "OCD" 24 hrs before conduct formal testing NotIFY 24hrs PROR</li> </ul>				
<ul> <li>Inform "OCD" 24 hrs before conduct formal testing NoTTPY 2411'S PRIME</li> <li>Install pressure recorder. Test 4-1/2" casing 500 psig for 30 minutes using pressure chart.</li> </ul>				
- If testing casing is successful. Install wellhead equipment and put well on injection.				
- Provide C-103 Su	bsequent report along with pr	essure chart to OCD.		
I hereby certify that the information grade tank has been/will be constructed				
grade tank has been/will be considered	he G			
SIGNATURE ) o lint /	1. May TITL	E_Land Manager	DATE_2/9/07	
Type or print name Robert M. Gra	Ay E-mail address: don.gray	@americoenergy.com T	Celephone No. 713-984-9700	
APPROVED BY:	Sur	Gerry Gu	re FEB	1 4 2007
APPROVED BY: /////	TITL			
Conditions of Approval (if any) District II - Artesia				