

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

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

WELL API NO. <b>30 - 015 - 35738</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>BO 8096</b>
7. Lease Name or Unit Agreement Name <b>Solomon State Com</b>
8. Well Number <b>1Y</b>
9. OGRID Number <b>233545</b>
10. Pool name or Wildcat <b>Turkey Track; Atoka (Gas) 86445</b>

**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  **APR - 7 2008**

2. Name of Operator **OCD-ARTESIA**  
**BOLD ENERGY, LP**

3. Address of Operator  
**415 W. Wall, Suite 500 Midland, Texas 79701**

4. Well Location  
 Unit Letter **H** : **1429** feet from the **North** line and **840** feet from the **East** line  
 Section **10** Township **19S** Range **29E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3375' GR**

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK  PLUG AND ABANDON   
 TEMPORARILY ABANDON  CHANGE PLANS   
 PULL OR ALTER CASING  MULTIPLE COMPL   
 OTHER:


SUBSEQUENT REPORT OF:

- REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  P AND A   
 CASING/CEMENT JOB   
 OTHER: **Atoka Recompletion**

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.

**12/26/2007:** Begin Atoka recompletion. Blow well down. **12/27/07:** TOOH w/ tubing. Set CIBP at 11,400' w/ 20' CMT. Test to 5,000 psi. Load casing with 140 bbls 3% KCL water. **12/28/07:** Perforated 10,862' - 10,864' (6 holes) at 3 spf, 22.7 gm charge, 102° phasing, 0.43" EHD. Broke down perfs at 3 bpm / 4,800 psi. Pumped 15 bbls 3% KCL water at Pavg = 4,460 psi. ISIP = 4,400 psi. 5 min SIP = 3,950 psi. 10 min SIP = 3,600 psi. 15 min SIP = 3,420 psi. Perforated 10,856' - 10,858' (6 holes); 10,827' - 10,829' (6 holes) at 3 spf, 22.7 gm charge, 102° phasing, 0.43" EHD. TIH w/ SN on 2-3/8" tubing w/ blast joint at surface for annulus frac. **12/29/07:** Fracture treated Atoka intervals w/ 52,285 lbs 20/40 CarboProp from 0.93 to 3.62 ppa using 35 - 30# Lightning fluid + 20Q N2. Pavg = 7,914 psi at 23.1 bpm. LTR = 1,385 bbls. ISIP = 6,789 psi. 5 min SIP = 6,392 psi. 10 min SIP = 6,043 psi. 15 min SIP = 5,209 psi. Began flowing well back while pumping nitrogen down annulus. Recovered 516 bbls in 13 hrs. Final FTP = 15 psi on 48/64" ck. Final CP = 750 psi. **12/30/07:** Flowing back frac: recovered 68 bbls in 24 hrs. Final FTP = 60 psi on 48/64" ck. Final CP = 525 psi. **12/31/07:** Flowing back frac: recovered 14 bbls in 10 hrs. Final FTP = 50 psi on 48/64" ck. Final CP = 480 psi. SIW. **1/2/08:** Well SI. SITP = 2,200 psi. SICP = 2,750 psi. **1/3/08:** Put well to sales.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE  TITLE Operations Engineering Manager DATE 4/2/08  
 Type or print name Shannon L. Klier E-mail address: shannon.klier@boldenergy.com Telephone No. 432 / 686-1100

For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_