Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resou	rces June 19, 2008 WELL API NO.
1625 N French Dr., Hobbs, NM 88240 District II		20.015.22059
1301 W Grand Ave, Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd, Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV 1220 S St Francis Dr, Santa Fe, NM	Santa I C, IVIVI 67303	6. State Oil & Gas Lease No. V-5391
87505	AND DEPONTS ON WELLS	
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		7. Lease Name or Unit Agreement Name Coinflip State
PROPOSALS) 1. Type of Well: Oil Well Gas	Well ⊠ Other	8. Well Number
2. Name of Operator	JAN 07 20	U9 1 9. OGRID Number
	nergy Corporation OCD-ART	ESIA 9. OGRID Number 14049
3. Address of Operator		10. Pool name or Wildcat
	artesia, NM 88211-0227	Wildcat; Atoka
4. Well Location		
		and 660 feet from the West line
Section 18	Township 20S Range 30	,
The same of the sa	Elevation (Show whether DR, RKB, RT, 3312' GR	GR, etc.)
12. Check Appr	opriate Box to Indicate Nature of I	Notice, Report or Other Data
NOTICE OF INTER	STION TO:	SUBSEQUENT REPORT OF:
•		AL WORK
		NCE DRILLING OPNS. P AND A
	JLTIPLE COMPL	CEMENT JOB
DOWNHOLE COMMINGLE		
OTHER:	☐ OTHER	Recompletion
13. Describe proposed or completed	operations. (Clearly state all pertinent de	etails, and give pertinent dates, including estimated date
	SEE RULE 1103. For Multiple Complete	ions: Attach wellbore diagram of proposed completion
or recompletion.	,	
Recompleted in the Atoka zone	as follows:	
12/16/09 Set CIDD ± 25' emt /	a 11725'	
12/16/08 – Set CIBP + 35' cmt @ 11725'. 12/17/08 – Perf the Atoka @ 11264' – 11271' (43 shots). ACCEPTED FOR RECORD		
	(10 511615)	ACCEPTED FOR RESORD
	•	
		JAN 7 7000
		Gerry Guye, Deputy Field Inspector NMOCD-District II ARTESIA
4.444.1.2.3.1		
Spud Date:	Rig Release Date:	
L		
Thombs Diff that the info	- i-t C 1	1.1. 11.1.6
I hereby dertify that the information abov	e is true and complete to the best of my k	nowledge and belief.
1 1 4	m a a	
SIGNATURE WAS A SIGNATURE WAS	TITLEProduction A	nalystDATE1/6/09
Type or print name Diana ABriggs	E-mail address: production @	narbob.com PHONE: (575) 748-3303
Type or print nameDiana \(\setminus \) Briggs \(\text{For State Use Only} \)	van address: _production@n	narooo.com PHONE: _(5/5) /48-3303_
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		