Submit 3 Copies To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 87240 District II 1301 W. Grand Ave, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410  State of New Mexico Energy, Minerals and Natural Resources  OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103
		June 19, 2008 WELL API NO.
		30-015-35453 5. Indicate Type of Lease
		STATE   FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	87303	6. State Oil & Gas Lease No.
87505		
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.)		7. Lease Name or Unit Agreement Name: Halo 1 State
1. Type of Well: Oil Well  Gas Well  Other		8. Well Number
2. Name of Operator .IAN 7 Z 2009		9. OGRID Number
Nearburg Producing Company  3. Address of Operator		015742 10. Pool name or Wildcat
3300 N A St., BLdg 2, Ste 120, Midland, TX 79705 4. Well Location		Artesia: Queen-Grayburg-San Andres
Unit Letter L: 2310 feet from the South line and 430 feet from the West line		
Section 1 Township 19S	Range 27E	NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3517		
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK  PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	COMMENCE DRILL	ING OPNS. P AND A
PULL OR ALTER CASING	CASING/CEMENT J	ов 🗆
DOWNHOLE COMMINGLE		
OTHER: Drilling Permit Extention	OTHER:	
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.		
Due to the drop in oil prices during the 4th quarter of 2008, NPC requests to extend the subject drilling permit, to be drilled more economic times.		
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Exp 3-3-11		
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Spud Date: Rig Rel	lease Date:	To Su
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE TITLE Prod/ Reg Analyst DATE OF		
Type or print name Sarah Jordan E-mail address: PHONE 432/686-8235		
For State Use Only		
	TTLE	DATE
Conditions of Approval (if any):		