

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

SEP 21 2009

Form C-103
June 19, 2008

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

WELL API NO. 30-015-02655
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. OG - 1644
7. Lease Name or Unit Agreement Name West Artesia Grayburg Unit
8. Well Number 11
9. OGRID Number 261198
10. Pool name or Wildcat Artesia-Qn-GB-SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3626' KB

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 **Water Injection**

2. Name of Operator
Doral Energy Corp.

3. Address of Operator
415 W. Wall Street, Suite 500 Midland, TX 79701

4. Well Location
Unit Letter **K** : **1650** feet from the **South** line and **1650** feet from the **West** line
Section **8** Township **18S** Range **28E** NMPM **Eddy** County

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Shut-in <input checked="" type="checkbox"/>	

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.

Well did not pass MIT. Pulled out of hole with 1,577' of tubing. Tubing was parted. Fished remainder of tubing and packer. Tripped in hole with test packer. Casing would not test above 1,578'. Lay down test packer and tubing. Secured well. Well shut-in 06/08/09.

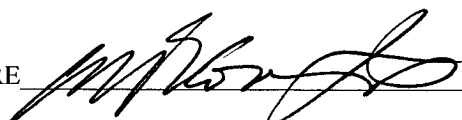
*DENIED. WELL CANNOT BE SHUT-IN WITH
A CASING FAILURE.
RE - NMOED 10/14/09
PLUGGING PROCEDURE TO BE SUBMITTED*

Spud Date:

Rig Release Date:

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

SIGNATURE



TITLE **Vice President of Operations**

DATE **09/18/2009**

Type or print name **C.M. Bloodworth, P.E.**

E-mail address: **martyb@doralenergy.com**

PHONE: **432/789-1180**

For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):