| Submit 3 Copies To Appropriate District Office | State of New Mexico | | OCT 0 1 2009 | Form C-103 |
|--|--|------------------------------|--------------------------------------|---------------|
| <u>District I</u> | Energy, Minerals and Natural Resources | | WELL API NO. | June 19, 2008 |
| 1625 N. French Dr., Hobbs, NM 88240 District II | | TT HOLON | 30 015 36858 | |
| 1301 W. Grand Ave , Artesia, NM 88210 | | | 5. Indicate Type of Leas | se |
| <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | STATE F | EE x |
| District IV | Santa Fe, NM 8/303 | | 6. State Oil & Gas Leas | e No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit Agreement Name | |
| (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.) | | 8. Well Number 12 7 Sectagor | | |
| 1. Type of Well: Oil Well Gas Well X Other - | | | | |
| 2. Name of Operator | | | 9. OGRID Number 194266 | |
| Rubicon Oil & Gas, LLC 3. Address of Operator | | | 194200 10. Pool name or Wildcat | |
| c/o P.O. Box 953, Midland, TX 79702 | | | Lakewood, Morrow (Gas) | |
| 4. Surface Well Location | | | | |
| Unit Letter J: 1535 feet from the South line and 1555 feet from the East line | | | | |
| Section 28 Township 19S Range 26E NMPM Eddy County | | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| 3050' GR | | | | |
| | | | | |
| 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 | | | | |
| PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB X | | | | |
| DOWNHOLE COMMINGLE | | | | |
| OTHER: TD | | | | |
| OTHER: TD 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. | | | | |
| of recompletion. | | | | |
| 9-11-09: Reached total depth of 9922'. Logged well. | | | | |
| 9-12-09: Ran 4 1/2", HCP 110, 1.6 ppf LTC casing to 9922'. 32 centralizers spaced 7000-9910'. BJ Services cemented well with 1180 sx | | | | |
| 35/65 H + 6% gel + additives (12.7 ppg/1.87 ft3 yld) and 765 sx 15/61/11 Super C + additives (13.2 ppg/1.58 ft3 yld). Top of tail cement | | | | |
| 6800'. Plug down 9-12-09. Pressure tested casing to 3000 psi for 30 minutes. Circulated 75 sx to steel pit. Displaced cement w/156 bbls 3% KCL FW + 2 gpt Inflo 150 surfactant. | | | | |
| 370 ROLL W 12 gpt mile 130 surfactant. | | | | |
| | | | | |
| | | | | |
| Spud Date: | Dia Palaga Data | | | |
| Spud Date. | Rig Release Date: | | | |
| | | | | |
| I hereby certify that the information a | hove is true and complete to the best | of my knowledge | e and belief | |
| | | | | |
| | | | | |
| SIGNATURE TITLE Regulatory Agent DATE 9-24-09 | | | | |
| Type or print nameAnn E. Ritchie E-mail address: ann.wtor@gmail.com PHONE: _432 684-6381 | | | | |
| For State Use Only | | | | |
| The state of the s | | | | |
| APPROVED BY: DATE 10/23/2009 | | | | |
| Conditions of Approval (if any): | | | | |
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