

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

October 13, 2009

RM

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JUL 13 2010

HOBBSOCD

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

~ Amended ~

WELL API NO. 30 015 20548

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name  
Skelly Unit

8. Well Number 111

9. OGRID Number 270265

10. Pool name or Wildcat SR-Q-G-SA

## 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 ☐

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2. Name of Operator

SandRidge Exploration &amp; Production, LLC

JUL 19 2010

3. Address of Operator

123 Robert S Kerr Ave, OKC OK 73102-6406

NMOCD ARTESIA

4. Well Location

Unit Letter I : 1980 feet from the S line and 660 feet from the E line

Section 14

Township 17S

Range 31E

NMPM

County Eddy

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

## 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 ☐DOWNHOLE COMMINGLE ☐OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐OTHER: Tubing information ☒

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/9/2010 RIH w/73 jts 2-7/8" J-55 6.5# EUE production tubing @ set @ 2181'.

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

Terri Stathem

TITLE Regulatory Manager

DATE 7/12/10

Type or print name Terri Stathem

E-mail address: tdstathem@sdrge.com

PHONE: 405 429 5682

## For State Use Only

APPROVED BY:

David Gray

TITLE Field Supervisor

DATE 7/19/2010

Conditions of Approval (if any):