Submit 1 Copy To Appropriate District I RECEIVED State of New Mexico Office District I Resources	Form C-103 October 13, 2009
1625 N. Franch Dr. Hobbs NM 88240 - 0 0 2010	WELL API NO.
District III 1000 Rio Brazos Rd, Aztec, NII MINOCO ARTES South St. Francis Dr. Santa Fe, NM 87505	30-015-37939
District III Actor No MACCD ARTES OS buth St. Francis Dr.	5. Indicate Type of Lease STATE ☒ FEE ☐
District IV 1220 S St Francis Dr, Santa Fe, NM	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 Bandit State
1. Type of Well: Oil Well X Gas Well C Other	8. Well Number 009
2. Name of Operator Read & Stevens, Inc.	9. OGRID Number 18917
3. Address of Operator P. O. Box 1518, Roswell, NM 88202-1518	10. Pool name or Wildcat Happy Valley; Delaware
4. Well Location	Trappy variey, Delaware
	90feet from theWestline
Section 10 Township 23S Range 26E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County Eddy
3,324' GR	
12 Challes Land Card	
12. Check Appropriate Box to Indicate Nature of Notice,	Report or Other Data
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRII	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	
DOWNHOLE COMMINGLE	•
OTHER: 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
00/10/10 00/20/10	
08/10/10 - 08/20/10 Proposed Joseph MIRLL Data Count @ 6:00 pers on 08/10/10 DIL 9.5/88 on Total lines to 1.500 on Total	
Prepare location. MIRU. Drlg. Spud @ 6:00 pm on 08/19/10. PU 8 5/8" csg. Test lines to 1,500 psi. Test	
okay. Cmt w/20 bbls gel pill w/50# bag WG-19, 200 sxs Extendacem w/additives. Tail in w/150 sxs Halcem additives. Bump plug 500 psi over. WOC. Pump top off cmt 100 sxs. Circ. WOC. TOC at surface. Circ 42	
	ks. Circ. WOC. TOC at surface. Circ 42
sxs cmt.	
[<u></u>	
Spud Date: 08/19/2010 Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge	and belief.
SIGNATURE Sund Run TITLE Operations Engineer	DATE 08/27/2010
Type or print name David Luna E-mail address: dluna@read-ste	evens.com PHONE: <u>575-622-3770</u>
APPROVED BY David Stay TITLE COMPLIANCE OFFICE DATE 8-30-10 Conditions of Approval (if any):	
sundry to include wt, grade, # of joint	s of csg.
report method of Top off-	OK
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