Office	o Appropriate District		ite of New Mex				Form C-103	
District I	Lights NIM 20240	Energy, Min	nerals and Natur	al Resources	WELL AP	NO	June 19, 2008	
District II						30-023-20015		
District III 1220 South St. Francis Dr.					5. Indicate Type of Lease STATE X FEE			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505						l & Gas Lease		
1220 S. St. Francis Dr., Santa Fe, NM 87505					**************************************	* *		
SUNDRY NOTICES AND REPORTS ON WELLS					7. Lease N	ame or Unit A	greement 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.)						Hueco South Unit 29 State		
1. Type of Well: Oil Well Gas Well X Other					8. Well Number 001			
2. Name of Operator Dan A. Hughes Company, L. P.					9. OGRID	Number 2510	54	
3. Address of Operator					10. Pool name or Wildcat			
	ver 669, 208 E.	Houston S	t., Beeville,	TX 78104-0669	Per	cha Shale		
4. Well Locati Unit L		2330 feet fro	om the Nor	th line and 6	60 f	eet from the	East line	
Sectio				nge 16W	NMPM	_	y Hidalgo	
		11. Elevation (S	how whether DR,	RKB, RT, GR, etc.)				
		46581	GR					
,	12. Check Ar	opropriate Box	to Indicate N	ature of Notice,	Report or (Other Data		
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING [
TEMPORARILY ABANDON								
PULL OR ALTI		MULTIPLE CON	1PL	CASING/CEMENT	JOB			
DOWNHOLE (COMMINGLE [
OTHER:				OTHER:				
	be proposed or comple ing any proposed wor							
	mpletion.	k). BEE ROLL	105. TOT WHITE	te Completions. 7th	uch wender	e diagram or p	roposed completion	
· · · · · · · · · · · · · · · · · · ·								
4/27/2011	Well shutin for	19 days. T	Idwell drove	e to location, 8	drilled	from 721	to 741	
			*					
				-	_		WED	
		*				RECE	IVED	
					,	O YAM	5 2011	
		•						
			•			NMOCD	ARTESIA	
-						·		
Spud Date:	5/28/2009		Rig Release Da	nte:				
L				L				
I haraby cartify	that the information a	have is true and	complete to the h	act of my knowledg	a and baliaf	· · · · · · · · · · · · · · · · · ·		
I hereby certify	that the information a	bove is true and	complete to the b	est of my knowledg	e and benen.			
SIGNATURE	Leffon		TITLE Op	erations Mana	ger	DATE	5/3/2011	
		Usena	<u> </u>				361/359-2752	
Type or print na For State Use		llseng	E-mail address	jeffi@dahug	iles.Het	PHONE:	361/358-3752	
Anomand &	mr roomed Tr	ald Miss	· TITLE	Field Super	/isor	DATE 5	-26-11	
Conditions of A	pproval (if any):	market and	LIILE			DATE_	<u> </u>	
OIVIN								