

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Revised August 1, 2011

HOBBS OCE
AUG 15 2011
RECEIVED

WELL API NO. 30-041-10207
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Milnesand Unit
8. Well Number #113
9. OGRID Number 257420
10. Pool name or Wildcat Milnesand, San Andres

<p>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.)</p>	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator EOR Operating Company	
3. Address of Operator 200 N. Loraine, Suite 1440 Midland, TX 79701	
4. Well Location Unit Letter A : 990 feet from the N line and 330 feet from the E line Section 12 Township 08S Range 34E NMPM County Roosevelt	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/></p>		<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/></p>	
OTHER: <input type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

7/29/11 MIRU plugging equipment. ND wellhead, NU BOP.

8/1/11 RIH w/ tbg set CIBP. Set @ 4533'. Circulated hole w/ mud laden fluid. Spotted 25 sx cement on top of CIBP. POH. WOC. Tagged plug @ 4203'. Pressured up on csg. To 500 psi. Perf'd csg @ 3010'. Tried to establish pump in rate. Pressured up to 1500 psi. RIH w/ tbg to 3060'. Spotted 25 sx cement @ 3060'-2698'. Pull out of cement. WOC.

8/2/11 Tagged plug @ 2682'. Perf'd csg @ 1505'. Set packer @ 1210'. Sqz'd 40 sx cement, displaced to 1390'. WOC. Tagged plug @ 1396'. POH. ND. BOP. Perf'd csg @ 440'. Sqz'd 135 sx cement to surface. Rigged down. Moved off.

8/6/11 Moved in backhoe and welder. Dug out cellar. Cut off wellhead. Welded on dry hole marker. Backfilled cellar. Cut off deadmen. Cleaned location and moved off.

Approved for plugging of well bore only.
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OGD Web Page under Forms, www.emnrd.state.nm.us/ogd.

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

Jana True

TITLE

Prod Asst

DATE

8/11/11

Type or print name Jana True

E-mail address: jtrue@enhancedoilres.com PHONE: 432-687-0303

For State Use Only

APPROVED BY:

TITLE

STAFF MGR

DATE

8-16-2011

Conditions of Approval (if

AUG 17 2011