

State of New Mexico
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

RECEIVED

FEB 20 2012

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WELL API NO. 30-025-34068
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 EIDSON 23
8. Well Number 1
9. OGRID Number 024010
10. Pool name or Wildcat SHOEBAR; WOLFCAMP

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 SWD2. Name of Operator
V-F PETROLEUM INC.3. Address of Operator
P.O. BOX 1889, MIDLAND, TEXAS 797024. Well Location
Unit Letter L : 1,980 feet from the SOUTH line and 660 feet from the WEST line
Section 23 Township 16-S Range 35-E NMPM LEA County11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,973' GLPit or Below-grade Tank Application ☐ or Closure ☐Pit type NONE Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 ☐
 OTHER: ☐

SUBSEQUENT REPORT OF:
 REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐
 OTHER: REPAIR CASING LEAK ☒

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.

09/09/11 Perforate 5 1/2" casing at 9,000'. Establish circulation to ground level through 8 5/8" annulus. Circulate cement behind 5 1/2" casing using 375 sx Class H 50/50 poz + 10% gel & 0.25# cello flake followed by 350 sx Class H 50/50 poz + 2% gel, 5% salt & 3# kol seal.

09/15/11 Run CBL. TOC by CBL 5,000'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.SIGNATURE M. Wayne Luna TITLE PRODUCTION SUPERINTENDENT DATE 2/10/12
Type or print name M. WAYNE LUNA E-mail address: _____ Telephone No. (432) 683-3344

(This space for State use)

APPROVED BY [Signature] TITLE Staff DATE 2-22-2012

Conditions of approval, if any:

FEB 22 2012