

HOBBS OCE

MAY 03 2012

RECEIVED

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO. 30-025-31956
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 Harrison -C-, B.F.
8. Well Number 1
9. OGRID Number 02799
10. Pool name or Wildcat N. Teague Lower Paddock - Blin Assoc.

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 ☐

2. Name of Operator

Breck Operating Corp.

3. Address of Operator

P.O. Box 911, Breckenridge, TX 76424

4. Well Location

Unit Letter L : 1840 feet from the South line and 670 feet from the West lineSection 9 Township 23S Range 37E NMPM Lea County11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3319' GR

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: ☐

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.

1. Drilled out CIBP @ 5072', circulate hole clean.
2. Squeezed perms 5112'-5244' w/ 150 sx cmt.
3. Drilled out cmt to 5162' and couldn't go any lower.
4. Pressure tested csg to 500 psi, dropped to 250 psi in 5 minutes.
5. Set CIBP @ 5060' w/ 2 sx cmt. Tested to 500 psi for 15 minutes, held.
6. Shut well in.

Spud Date:

4/11/12

Rig Release Date:

4/19/12

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE Engineer

DATE March 30, 2012

Type or print name Matthew Thompson

E-mail address: mthompson@breckop.com

PHONE: (254) 559-3355

For State Use Only

APPROVED BY:

TITLE

STAFF NMR

DATE

5-3-2012

Conditions of Approval (if any):