

Submit 3 Copies To Appropriate District
Office
District I
1625 N French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
June 19, 2008

OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505 JUN 19 2012		WELL API NO. 30-025-24645
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>		6. State Oil & Gas Lease No. K-4605
7. Lease Name or Unit Agreement Name North Vacuum Abo North Unit 7-C		8. Well Number 2
9. OGRID Number 252496		10. Pool name or Wildcat North Vacuum Abo
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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		
2. Name of Operator Sheridan Production, LLC		
3. Address of Operator 200 N. Loraine Ste. 530 Midland, TX 79701		
4. Well Location Unit Letter <u>H</u> : <u>860</u> feet from the <u>East</u> line and <u>1980</u> feet from the <u>North</u> line Section <u>1</u> Township <u>17-S</u> Range <u>34-E</u> NMPM <u>Lea</u> County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4028.9 GR		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>RE-TEST</u> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6/13/2012 - Ran MIT. Witnessed by Maxey Brown. Permission to resume operations.

**C-103 INTENT DATED 6/8/2012
WORK WAS NEVER DONE!**

Perfs are 8738' - 8851'

Spud Date:

Rig Release Date:

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

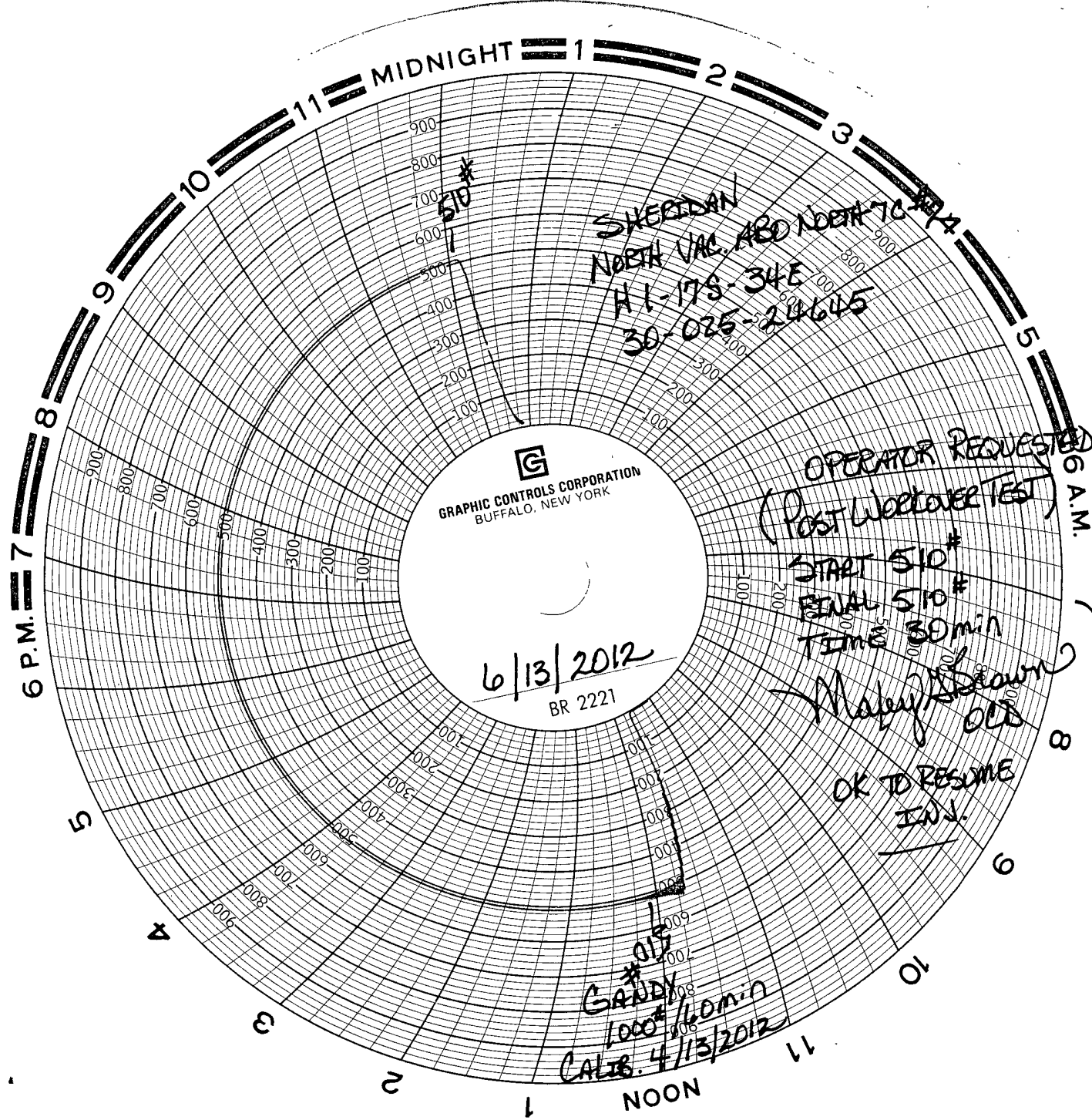
SIGNATURE Sylvia Shoemaker TITLE Regulatory Analyst DATE 06/18/2012

Type or print name Sylvia Shoemaker E-mail address: s shoemaker@sheridanproduction.com PHONE: 432 596-4266

For State Use Only

APPROVED BY: Maxey Brown TITLE Compliance Officer DATE 6/19/2012
Conditions of Approval (if any)

JUN 20 2012




GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

6/13/2012
BR 2221

SHERIDAN
NORTH VAC. ABD NORTH 7C-174
H1-178-34E
30-025-24645

OPERATOR REQUESTED
(Post Wakeover Test)

START 510#
FINAL 510#
TIME 30min

Maby/Blawn
OLD

OK TO RESUME
IND.

GANDY
1000# 160min
CALIB. 4/13/2012