

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
May 27, 2004

HOBBS OGD CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

AUG 08 2012

RECEIVED

WELL API NO. <input checked="" type="checkbox"/>
30-025-09198
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name EMERY KING S.E.
8. Well Number 5
9. OGRID Number 143199
10. Pool name or Wildcat LANGLIE MATTIX (7R-Q)

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator ENERVEST OPERATION
3. Address of Operator 1001 FANNIN STE 800 HOUSTON, TX 77002

4. Well Location Unit Letter P: 990 feet from the SOUTH line and 990 feet from the EAST line Section 23 Township 33E Range 36E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water N/A
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 <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

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"/>	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 07/18/12 Tag CIBP at 3,505' Circulate hole spot 25 sxs cmt.
- 07/19/12 Spot 25 sxs cmt 2,715' TOC 2,468'.
- 07/19/12 Spot 25 sxs cmt 1,612' WOC & tag 1,400'
- 07/19/12 Perf 353' circulate 160 sxs cmt to surface.
- 07/20/12 Top off 5 sxs cmt. Cut and Cap well install dry hole marker.

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.

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 NMOC guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Gary Eggleston (Basic Energy Services) DATE 7-31-12

Type or print name: _____ E-mail address: _____ Telephone No. 432-563-3355

For State Use Only

APPROVED BY: [Signature] TITLE Compliance Officer DATE 8/8/2012

Conditions of Approval (if any):

AUG 09 2012