Submit 1 Copy To Appropriate District Office State of New Mexico			Form C-103	
District 1 Energy, Minerals and Natural Resources			ber 13, 2009	
1625 N. French Dr., Hobbs, NM 88240  District II			WELL API NO. 30-025-32105	
1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410 FEB 08 201220 South St. Francis Dr.			STATE FEE	
District IV Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			LG-2833	
l e e e e e e e e e e e e e e e e e e e	ND REPORTS ON WELL		7. Lease Name or Unit Agreeme	ent Name
(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.)	TORTERWIT (TORWIC-101)1	4	Mobil Lea State	
<u></u>			8. Well Number	
1. Type of Well: Oil Well Gas W	ell  Other	jection	3	
2. Name of Operator			9. OGRID Number 001092	
Armstrong Energy Corporation  3. Address of Operator			10. Pool name or Wildcat	
P.O. Box 1973, Roswell, NM 88202-1973			Lea Delaware, NE	
4. Well Location	103Well, 14141 00202 1773		Eca Belaware, 14E	
Unit Letter M: 990	feet from the South	line and87	feet from the West	line
Section 2 Town		fille and87 nge 34E	NMPM Lea County	_
	levation (Show whether DI			
11. L	icvation (show whether Di	i, Mid, M1, ON, etc.		
	***************************************			
12. Check Approx	oriate Box to Indicate N	Nature of Notice	Report or Other Data	
12. Oneck ripprop	Line Don to majoute 1		report of Onior Data	
NOTICE OF INTENTION TO:		SUBSEQUEN	IT REPORT OF:	
PERFORM REMÉDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK				ASING 🗌
TEMPORARILY ABANDON			LING OPNS. 🔲 PAND A	
PULL OR ALTER CASING   MU	LTIPLE COMPL	CASING/CEMENT	JOB 🗌	
DOWNHOLE COMMINGLE				
OTHER:	г	OTHER:	M.I.T. Test	$\boxtimes$
	c (Classia state all partinant			
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.				
FF			ang. am or proposed completion of re	compression.
02-01-13 M.I.T. Test. Well pulled for		formed M.I.T. for a	total of 32 minutes @ 420 psi.	
Notified Mark Whitaker w	/IIII OCD.			
CHART ATTACHED				
0				
	<del></del>			
Spud Date:	Rig Release D	eate:		
		atc.		
		· <del></del>	<del></del>	
I hereby certify that the information above is	strue and complete to the k	est of my knowledg	ge and helief	
increasy corning and incompanion tooks is		est of my knowledg	ge and belief.	
SIGNATURE	TITLE	Engineer	DATE02-07-2013	3
Type or print name <u>Kyle Alpers</u> E-1	nail address: <u>kalpers@a</u>	ırmstrongenergycor	p.com PHONE: (575) 625-222	22
/_	1			
For State Use Only		/	_	_
APPROVED BY:	TITLE	ret MED	DATE 2-11-2	413
Conditions of Approval (if any):		4/10 4		

5