Submit 1 Copy To Appropriate Dis <b>CANADA</b> State of New Mexico	Form C-103
Pierrey Minerals and Natural Reso	urces Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 882407 6 7 WW  District II – (575) 748-1283	JON 30-025-252 <b>5</b> 7-0000
511 5.1 list 5t., Artesia, 144 65210	5. Indicate Type of Lease  STATE FEE
District III – (505) 334-6178   1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87400 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Rhodes Yates Unit
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number 004
2. Name of Operator PPC Operating Company LLC	9. OGRID Number 288774
3. Address of Operator	10. Pool name or Wildcat
1500 Industrial Blvd, Ste 102; Abilene, TX 79602	Rhodes; Yates-Seven Rivers
4. Well Location  Unit Letter A: 560 feet from the North line and 660 feet from the East line	
Unit Letter A: 560 feet from the North line and 660 feet from the Last line Section '28 Township 265 Range 37E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of	Notice, Report or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
	DIAL WORK
	ENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING   MULTIPLE COMPL   CASING DOWNHOLE COMMINGLE	G/CEMENT JOB
_	AUT TO A
OTHER: OTHER: MIT Test Report X  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.	
Well was pressure tested (MIT) 05/08/2013.	
wen was pressure tested (Mirry 03/06/2013.	
Spud Date: 01/23/1976 Rig Release Date: 0	1/31/1976
Tag Tolease Date.	
I hereby certify that the information above is true and complete to the best of my	knowledge and belief.
Xe Add	0.4/0.4/0.4
SIGNATURE TITLE Office Adminis	Strator DATE 05/23/2013
Type or print name Jana Spraberry E-mail address: jspraberry@plantationpetro.com PHONE: 325-267-6046	
For State Use Only	
APPROVED BY TITLE DIST	144 DATE-29-2013
Conditions of Approval (it any):	
, <del>-</del>	uus: A 9019
	JUN 0 4 2013

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