

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
**HOBBS**, Minerals and Natural Resources  
**RECEIVED**  
**Oil CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised August 1, 2011

WELL API NO. 30-025-24480
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 309574
7. Lease Name or Unit Agreement Name Langlie Jal Unit
8. Well Number 070
9. OGRID Number 263848
10. Pool name or Wildcat Langlie Mattix: 7Rivers-Queen-Grayburg

**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  
Resaca Operating Company

3. Address of Operator  
1331 Lamar Street, Suite 1450 Houston, TX 77010

4. Well Location  
 Unit Letter M : 660 feet from the South line and 460 feet from the West line  
 Section 6 Township 25S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3183' GL

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <u>Extend TA Status of Well</u> <input checked="" type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

Resaca Operating Company respectfully requests an extension of TA status for this well for a period of 6 months.

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 Melanie Reyes TITLE Engineer Assistant DATE 6/05/2013

Type or print name Melanie Reyes E-mail address: melanie.reyes@resacaexploitation.com PHONE: (432) 580-8500

APPROVED BY: [Signature] TITLE Dist. MGR DATE 6-6-2013  
 Conditions of Approval (if any):

JUN 06 2013