|   | •                      |                       |                                       |                                       |                                       |
|---|------------------------|-----------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Submit 3 Copies To Appropriate Distri<br>Office   | 0                      | tate of New Me        |                                       |                                       | Form C-103                            |
| 1625 N. French Dr., Hobbs, NM 88240   |                        |                       |                                       | WELL API NO.                          | June 19, 2008                         |
| District II<br>1301 W. Grand Ave., Artesia, NM 882<br>District III  | A & 2 TOIL CO          | NSERVATION            | DIVISION                              | 30-025-12583                          |                                       |
| District m  |                        | 0 South St. Frar      | ncis Dr.                              | 5. Indicate Type of Le<br>STATE       | ase<br>FEE 🕅                          |
| 1000 Rio Brazos Rd., Aztec, NM 8741<br>District IV  | _ 2                    | Santa Fe, NM 87       | 7505                                  | 6. State Oil & Gas Lea                |                                       |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  | RECEIVED               |                       |                                       |                                       |                                       |
| SUNDRY N  | OTICES AND REPO        |                       |                                       | 7. Lease Name or Unit                 | t Agreement Name                      |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH<br>PROPOSALS.) |                        |                       |                                       | SCHENCK ATP                           |                                       |
| 1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other  |                        |                       |                                       | 8. Well Number #1                     |                                       |
| 2. Name of Operator   |                        |                       |                                       | 9. OGRID Number 28                    | 81994                                 |
| LRE OPERATING, LLC.   3. Address of Operator  |                        |                       |                                       | 10. Pool name or Wildcat:             |                                       |
| c/o Mike Pippin LLC, 3104 N. Sullivan, Farmington, NM 87401   |                        |                       |                                       | Townsend Permo Upper Penn (59847)     |                                       |
| 4. Well Location  |                        |                       |                                       | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
|   | feet from theN         |                       |                                       |                                       | ne                                    |
| Section 11  |                        | vnship 16-S           |                                       | NMPM Lea Cour                         | nty                                   |
|   | 3988' GL               | Show whether DR,      | RKB, RT, GR, etc.)                    |                                       |                                       |
|   |                        |                       |                                       |                                       |                                       |
| 12. Cheo  | ck Appropriate Bo      | ox to Indicate N      | ature of Notice, I                    | Report or Other Data                  | a                                     |
| NOTICE OF   | FINTENTION TO          | D:                    | SUB                                   | SEQUENT REPOR                         | RT OF:                                |
| PERFORM REMEDIAL WORK   |                        | BANDON 🛛              | REMEDIAL WORK                         |                                       | ERING CASING                          |
| TEMPORARILY ABANDON   | CHANGE PLA             |                       | COMMENCE DRI                          |                                       |                                       |
| PULL OR ALTER CASING  |                        | MPL                   | CASING/CEMENT                         | ЈОВ 🗌                                 |                                       |
| DOWNHOLE COMMINGLE  |                        |                       |                                       |                                       |                                       |
| OTHER: P&A  |                        | $\square$             | OTHER:                                |                                       |                                       |
| 13. Describe proposed or co   |                        |                       |                                       |                                       |                                       |
| of starting any proposed<br>or recompletion.  | a work). SEE RULE      | 1103. For Multip      | le Completions: Att                   | ach wellbore diagram of               | proposed completio                    |
|   |                        |                       |                                       |                                       |                                       |
| LDE ODED ATING LLC would  | like to De A this ma   |                       |                                       | advetien environment. Di              |                                       |
| LRE OPERATING, LLC would<br>Upper Penn perfs (10,822'-10,9  |                        |                       |                                       |                                       |                                       |
| 10,260'-62', & Top of Wolfcan   |                        |                       |                                       |                                       |                                       |
| w/P&A mud (25 sx gel/100 bbls   |                        |                       |                                       |                                       |                                       |
| plug (~226') @ 8030'. WOC. 7<br>6303'. WOC, Tag cmt. <u>Plug #</u>  |                        |                       |                                       |                                       |                                       |
| (~416') @ 5013'. WOC, Tag ci  |                        |                       |                                       |                                       |                                       |
| 3176'. WOC. Tag cmt. Plug #6  | 6 (380'-Surface): 13   | -3/8" shoe @ 330'     | . W/tbg @ 380', cir                   | c cmt to surface. TOH.                | Cut off csg below                     |
| surface csg flange. Top off all cars off anchors and restore location.  |                        |                       |                                       | overnment specs. RD mo                | ove off location, cut                 |
| on anchors and restore location.  | Any now back with      | be into a closed lo   | op system.                            |                                       |                                       |
| Smud Data: 1/2/00   |                        |                       | alaan Dataa                           | 19/00                                 |                                       |
| Spud Date: 1/3/00<br>I hereby certify that the informat   | tion above is true and | Drilling Rig R        |                                       | /8/00                                 | ·····                                 |
| i hereby certify that the informat  | $\sim $                | complete to the be    | st of my knowledge                    | and bener.                            |                                       |
| SIGNATURE <i>M. J.</i>  | Rippin                 | TITLE_ <u>Petrole</u> | eum Engineer - Ager                   | nt DATE <u>8</u>                      | 3/5/13                                |
| Type or print name Mike Pip   | nin                    | E-mail address:       | mike@pippinll                         | com PHONE                             | 505-327-4573                          |
| For State Use Only  |                        | + 2 mun uun ess.      | /                                     |                                       | 505-521-4515                          |
| ADDROVED DY ST  | 7/ /                   | In Dir                | t mor                                 |                                       | 10-10-200                             |
| APPROVED BY:<br>Conditions of Approval (if any):  | man                    |                       | · · · · · · · · · · · · · · · · · · · | DATE                                  | VIV COL                               |
| (ii ully).  |                        |                       |                                       |                                       |                                       |
| 1   |                        |                       |                                       |                                       | · · · · · · · · · · · · · · · · · · · |
|   |                        |                       | /                                     |                                       | On N                                  |
|   |                        |                       | <i>'</i>                              | 00T 4                                 | 0 2013 XN                             |

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