

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

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

WELL API NO. 30-025-05147
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name T. D. Pope
8. Well Number 14
9. OGRID Number 227103
10. Pool name or Wildcat Denton; Devonian (16910)

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 Platinum Exploration Inc	
3. Address of Operator 550 W. Texas, Suite 500 Midland, TX 79701 432-687-1664	
4. Well Location BHL P 330-333 S 330-332 E Surface Unit Letter O : 660 feet from the S line and 1980 feet from the E line Section 26 Township 14S Range 37E NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3796' GL	

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 _____
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 ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PAND A ☐
CASING/CEMENT JOB ☐

OTHER: ☒

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.

12/7/05-12/9/05 RU Petroplex acidize Dev lateral @ 12800' to 14065". Mid lateral 11 1/4" holes, end of tbg @ 14097'. Perforated @ 12065' - 13900' - 13865' - 13350' - 13300' - 13250' - 13200' - 13030' - 12990' - 12800' - pkr set @ 12262'. start acid 1st stage @ 4.1 BPM tbg pres. 0 psi. Up rate to 7.5 BPM 95.9 Bbl out tbg pres. 142 psi loaded 112 Bbl out tbg 1588 psi. Start block 7.5 BPM 125 BBL out tbg 50 psi on acid 7.5 BPM 135.3 Bbl out 50 psi on tbg block 7.5 BPM 196.3 Bbl out tbg. Psi 1191. Acid on formation. 7.5 BPM 206.3 Bbl out tbg 1490 psi. Start block 7.5 BPM 256.3 BBL out tbg 989 psi on acid 7.5 BPM 264 Bbl out tbg 999 psi. Block on formation 7.5 BPM 327.3 Bbl out tbg 1492 psi. Acid on formation 7.5 BPM 335 Bbl out tbg 1749 psi. Start block 7.5 BPM 389.9 Bbl out tbg 1779 psi on acid 7.5 BPM 392 Bbl out tbg 1402 psi. Block on formation 7.5 BPM 454.9 Bbl out tbg 1712. psi. Acid on form 7.5 BPM 463 Bbl out 1490 psi. Start block 7.5 BPM 511.7 Bbl out tbg 2017 psi. Start acid 7.5 BPM 518.6 Bbl out 1933 psi blk on form. 7.1 BPM 582.7 out tbg 1969 psi. Acid on form 7.1 BPM 589.6 Bbl out tbg 2001 psi. 7.1 BPM 640.9 Bbl out tbg 1963 psi on flush. 7.1 BPM 661.6 Bbl out tbg 1970 psi. 7.1 BPM 740.8 Bbl out tbg 2183 psi 761.8 Bbl out. SD ISIP 0 psi. Avg rate 7.5 BPM. Avg pres 2000 psi. Total load 762 Bbl. Unset pkr. POOH w 62 jts. RU swab RIH tag FL @ 5900', POOH RD swab. LD 20 jts & tally out & std back w/ 72 stds tbg. RIH w/ sub pump & RD Bottom of pump hanging @ 11701.60'.

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

SIGNATURE Debbie Freeman TITLE Agent DATE 12/13/05

Type or print name Debbie Freeman E-mail address: debbief@3minfield.com
For State Use Only OC FIELD REPRESENTATIVE NO STATE MANAGER

APPROVED BY: Harry W. Wink TITLE _____ DATE DEC 28 2005

Conditions of Approval (if any):

DEC 28 2005