Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	May 27, 2004 WELL API NO. 30-025-22397
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		E-881
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.)		7. Lease Name or Unit Agreement Name Aztec State
1. Type of Well: Oil Well	Gas Well OtherWIW	8. Well Number 7
2. Name of Operator Latigo Petroleum, Inc.		9. OGRID Number 227001
3. Address of Operator P.O. Box 10340		10. Pool name or Wildcat
Midland,	TX 79702-7340	Maljamar Grayburg San Andres
4. Well Location		
	2140 feet from the N line and _	
Section 8	Township 17S Range 33E	NMPM CountyLea
	11. Elevation (Show whether DR, RKB, RT, GR, e	tc.)
Pit or Below-grade Tank Application []		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water		
Pit Liner Thickness: mil	Below-Grade Tank: Volume bbls;	Construction Material
12. Check	Appropriate Box to Indicate Nature of Notic	e, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WO	
	· · · · · · · · · · · · · · · · · · ·	PRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	NT JOB
OTHER:	OTHER:Increas	sed injection pressure
13. Describe proposed or composed we for recompletion.	letted operations. (Clearly state all pertinent details, ork). SEE RULE 1103. For Multiple Completions:	and give pertinent dates, including estimated date
Administrative Order WFX676 11-	6-95 dated 11/6/1995.	
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9/20/96 - Per Division Order No. Il	PI-271 we increased injection pressure and began injection	ecting an average of 45 bwipd @ 2150#.
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I hereby certify that the information grade tank has been/will be constructed or	above is true and complete to the best of my knowled closed according to NMOCD guidelines [], a general permit	ge and helief I further cortify that any nit on helen
SIGNATURE LISA H	TITLE Regulatory Analyst	DATE 10/12/2006
T		D/111 10/12/2000
Type or print name Lisa Hunt For State Use Only		
	E-mail address:huntl@pog	oproducing.com Telephone No. (432)685-8229
APPROVED BY:	17	
APPROVED BY: Lawy. Conditions of Approval (if any):	Wink TITLE	DA GCT 1 6 2006