

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

|                                                                                                                                                                                                                |  |                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)  |  | WELL API NO.<br>30-025-37958                                                                        |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other                                                                                                          |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Plantation Operating, LLC                                                                                                                                                               |  | 6. State Oil & Gas Lease No.                                                                        |
| 3. Address of Operator<br>2203 Timberloch Place, Suite 229, The Woodlands, TX 77380                                                                                                                            |  | 7. Lease Name or Unit Agreement Name<br><b>Turner State</b>                                         |
| 4. Well Location<br>Unit Letter <u>B</u> : <u>660</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line<br>Section <u>32</u> Township <u>20S</u> Range <u>37E</u> NMPM Lea County |  | 8. Well Number <u>4</u>                                                                             |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3525' GR                                                                                                                                                 |  | 9. OGRID Number <u>237788</u>                                                                       |
| 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

|                                                |                                           |                                                             |                                          |
|------------------------------------------------|-------------------------------------------|-------------------------------------------------------------|------------------------------------------|
| <b>NOTICE OF INTENTION TO:</b>                 |                                           | <b>SUBSEQUENT REPORT OF:</b>                                |                                          |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                      | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>                  |                                          |
| OTHER: _____                                   | Recompletion <input type="checkbox"/>     | 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.

Move in and rig up Select Well Service Rig #4. Spud 9-7/8" hole at 0600 hrs on 8/24/2006. Notified OCD Hobbs, NM of spud.



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 Kimberly Faldyn TITLE Production Tech DATE 10/3/2006

Type or print name Kimberly Faldyn E-mail address: kfaldyn@plantationpetro.com Telephone No. 281-296-7222

For State Use Only

APPROVED BY: CHRIS WILLIAMS TITLE DISTRICT SUPERVISOR/GENERAL MANAGER DATE \_\_\_\_\_  
Conditions of Approval (if any) \_\_\_\_\_

OCT 25 2006

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.<br>30-025-37958                                                                        |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br><b>Turner State</b>                                         |
| 8. Well Number <b>4</b>                                                                             |
| 9. OGRID Number <b>237788</b>                                                                       |
| 10. Pool name or Wildcat<br>Eumont (Yates-7 Rivers-Queen) (Gas)                                     |

|                                                                                                                                                                                                                       |                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| 4. Well Location<br>Unit Letter <b>B</b> : <b>660</b> feet from the <b>North</b> line and <b>1980</b> feet from the <b>East</b> line<br>Section <b>32</b> Township <b>20S</b> Range <b>37E</b> NMPM <b>Lea</b> County |                                                                  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br><b>3525' GR</b>                                                                                                                                                 |                                                                  |
| 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: \_\_\_\_\_ Recompletion ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND 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.

8/24/2006 – 8/30/2006

Drill 9-7/8" hole to 1105'. TD 9-7/8" hole at 2200 hrs 8/28/2006. Run 25 jts, 7", 26#, J55, ST&C csg. Shoe at 1105'. Float collar at 1060'. Cmt w/150 sx BJ Lite 65/35/6 + 5% salt. Yld – 1.98, Wt – 14.8#. Tail w/200 sx Class "C" + 2% CaCL2. Yld – 1.34, Wt. 14.8#. Plug down at 1700 hrs, 8/29/2006. Circ 90 sx to surface.

Notified OCD Hobbs, NM of running csg & cementing.

WOC, NU and test BOP & manifold to 2000 psi – OK.

Drill out w/6-1/8" bit to 1105'.

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 Kimberly Faldyn TITLE Production Tech DATE 10/3/2006

Type or print name Kimberly Faldyn  
For State Use Only

E-mail address: kfaldyn@plantationpetro.com Telephone No. 281-296-7222

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): \_\_\_\_\_

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

|                                                                                                                                                                                                                |  |                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)  |  | WELL API NO.<br>30-025-37958                                                                        |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other                                                                                                          |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Plantation Operating, LLC                                                                                                                                                               |  | 6. State Oil & Gas Lease No.                                                                        |
| 3. Address of Operator<br>2203 Timberloch Place, Suite 229, The Woodlands, TX 77380                                                                                                                            |  | 7. Lease Name or Unit Agreement Name<br><b>Turner State</b>                                         |
| 4. Well Location<br>Unit Letter <u>B</u> : <u>660</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line<br>Section <u>32</u> Township <u>20S</u> Range <u>37E</u> NMPM Lea County |  | 8. Well Number <u>4</u>                                                                             |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3525' GR                                                                                                                                                 |  | 9. OGRID Number <u>237788</u>                                                                       |
| 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

|                                                |                                           |                                                       |                                          |
|------------------------------------------------|-------------------------------------------|-------------------------------------------------------|------------------------------------------|
| <b>NOTICE OF INTENTION TO:</b>                 |                                           | <b>SUBSEQUENT REPORT OF:</b>                          |                                          |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>      | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input checked="" type="checkbox"/> |                                          |
| OTHER: _____                                   | Recompletion <input type="checkbox"/>     | 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.

8/30/2006 – 9/6/2006:

Drill 6-1/8" hole from 1105' to 3820'. TD 6-1/8" hole at 0800 hrs 9/5/2006. Run 90 jts, 4.5" 11.6#, J55 LT&C csg. Float shoe at 3820'. Float collar at 3775'. Cement 4.5" csg w/ 250 sx 50:50:10 "C" Lite + 5% Salt + 10% gel., Yield 2.3, Wt. 12.0#. Tail w/ 150 sx Class "C" + .6% FL-62 +.2% SMS. Plug down at 1700 hrs, 9/5/2006. Circulated 51 sx to the surface. Rig released at 0200 hrs, 9/6/2006.

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 Kimberly Faldyn TITLE Production Tech DATE 10/3/2006

Type or print name Kimberly Faldyn  
**For State Use Only**

E-mail address: kfaldyn@plantationpetro.com Telephone No. 281-296-7222

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): \_\_\_\_\_