| OCD-HOBBS   |  |                            |   |   |                          |       |  |
|---|--|----------------------------|---|---|--------------------------|-------|--|
| BUNDRY  | om 3160-5 LINITED STATES   |                            |   |   |                          | -     |  |
|   | ell. Use Form 3160 - 3 (APD) for   |                            |   |   | , Allottee or Tribe Name |       |  |
|   | PLICATE- Other instructions  | s on revers                | se side.  | 7. If Unit or CA/Agreement, Name and/or No.             |                          |       |  |
| 1. Type of Well   | Gas Well Other   |                            |   | 8. Well Name and No.                                    |                          |       |  |
| 2. Name of Operator Plantation Op   | perating, LLC  | Britt "I<br>9. API We      | 3-8" No. 2<br>Il No.                                    | -   |                          |       |  |
| 3a. Address<br>2203 Timberloch Place, St 229,   |  | ne No. (include<br>96-7222 | area code)  | 30-025-06007<br>10. Field and Pool, or Exploratory Area |                          |       |  |
| 4. Location of Well (Footage, Sec., 7   |  |                            | Monument (Paddock)                                      |   |                          |       |  |
| 330' FNL & 2310' FWL (Unit (<br>Section 8, T-20-S, R-37-E, N.M  |  |                            |   | 11. County or Parish, State<br>Lea Co., NM              |                          |       |  |
| 12. CHECK AP  | PROPRIATE BOX(ES) TO INDICAT   | TE NATURI                  | E OF NOTICE, RI   |   |                          |       |  |
| TYPE OF SUBMISSION  |  |                            | E OF ACTION   |   |                          | -     |  |
| Notice of Intent  | Acidize Deeper   |                            | Production (Stat  |   | Water Shut-Off           | -     |  |
| Subsequent Report   | Casing Repair  | Construction               | Recomplete  |   | Other                    | -     |  |
| Final Abandonment Notice Convert to Injection Plug Back Water Disposal  |  |                            |   |   |                          | -     |  |
| Alter Casing Fracture Trait Reclamation Well integrity   Subsequent Report Casing Repair New Construction Recomplete Other   Final Abandonment Notice Convert to Injection Plug and Abandon Temporarily Abandon   13. Describe Proposed or Complete Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof.   14. Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports start balled within 50 dors and the some of the involved operation. If the operation results in a multiple completion or recompletion in a new interval, a Fortpito04 shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)   Operator proposes the following: .   1. Cleanout wellbore to CIBP at 5234'. .   2. Run GR, Cased Hole Neutron, and CBL across to 4000'. .   3. Squeeze cmt across Paddock if needed. fract and place well on production.   Atcidize perfs and place well on production. .   Attick performed provements. .   Mater and the site of the deta. .   . . .   . . .   . . . |  |                            |   |   |                          |       |  |
| 14. I hereby certify that the foregoing Name (Printed/Typed)<br>Kimberly Faldyn   |  | Title Pr                   | oduction Tech   |   |                          |       |  |
| Signature Kimulu  | In Faldim  | Date                       | 1(  | 0/26/2006   | APPROVED                 | •     |  |
|   | (THIS SPACE FOR FEDER  | AL OR SI                   | TATE OFFICE   | USE   |                          | ]     |  |
| certify that the applicant holds legal<br>which would entitle the applicant to<br>Title 18 U.S.C. Section 1001 and Title<br>States any false, fictitious or fraudule<br>(Instructions on page 2)  | 43 U.S.C. Section 1212, make it a crime for<br>ent statements or representations as to any m | arrant or<br>ct lease Of   | tle<br>fice<br>owingly and willfully t<br>jurisdiction. |   | WESLEY W. INGRAM         | <br>R |  |
| G   | G WW   |                            |   |   |                          |       |  |

| District I<br>1625 N. French Dr., Hobbs, NM 88240<br>District II   |                                    | f New Mexico<br>Iatural Resources Department   | Form C-102<br>Revised October 12, 2003 |  |  |  |  |
|--|------------------------------------|--|--|--|--|--|--|
| 1301 W. Grand Avenue, Artesia, NM 88210<br><u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410<br><u>District IV</u> | OIL CONSER<br>1220 Sout<br>Santa F | Submit to Appropriate Distrct Office<br>State Lease - 4 Copies<br>Fee Lease - 3 Copies |  |  |  |  |  |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 AMENDED REPORT   |                                    |  |  |  |  |  |  |
| 'API Number<br>30-025-06007  | <sup>2</sup> Pool Code<br>49210    | <sup>'Pool Name</sup><br>Monument (Paddock) Oil  |  |  |  |  |  |

.

~~

| 1 30-02   | 0000         | 1                              |  | 4321                  |                   |                  | monumor            |                       |               |
|---|--------------|--------------------------------|--|-----------------------|-------------------|------------------|--------------------|-----------------------|---------------|
| Property C<br>30209   |              | 'Property Name<br>Brittt "B-8" |  |                       |                   |                  | ŕv                 | 'Well Number<br>2     |               |
| OGRID 1 23778   |              |                                | 'Operator Name<br>Plantation Operating LLC |                       |                   |                  |                    | 'Elevation<br>3567    |               |
| <sup>10</sup> Surface Location                              |              |                                |  |                       |                   |                  |                    |                       |               |
| UL or lot no.<br>C  | Section<br>8 | Township<br>20S                | Range<br>37E                               | Lot Idn               | Feet from the 330 |                  | Feet from the 2310 | East/West line<br>FWL | County<br>Lea |
| <sup>11</sup> Bottom Hole Location If DifferentFrom Surface |              |                                |  |                       |                   |                  |                    |                       |               |
| UL or lot no.   | Section      | Township                       | Range                                      |                       | Feet from the     | North/South line | Feet from the      | East/West line        | County        |
| <sup>12</sup> Dedicated Acres<br>40                         | " Joint of   | .                              | onsolidation                               | Code <sup>15</sup> Or | đer No.           |                  |                    |                       |               |

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

| 16 | 330' FNL | ' No. 2<br>lete to Paddock)<br>& 2310' FWL (C)<br>20S, R-37E | 17 OPERATOR CERTIFICATION<br>I hereby certifithat the information contained hereins true and completed<br>the best of my kawledgeand belief, andhat this organiation either owna<br>working interestor unleased mineal interest in the and includinghe<br>proposed bottom ble location or its a right to diff this well at this location<br>pursuant to a contact with an own of such a mineral pworking interest<br>or to a voluntar pooling agreement or a compulsor pooling order<br>heretofore intered by the livision<br>Signature<br>John Allred<br>PrintedName |
|----|----------|--|---|
|    |          |  | <sup>18</sup> SURVEYOR CERTIFICATION<br>I hereby certify hat the well locaton shown on thisplat<br>was plotted from jeld notes of actual surveys made by<br>me or under my supervision, and thathe same is true<br>and correct to thebest of my belief<br>Date of Survey<br>Signature and SeabfProfessional Surveyr:     Certificate Numbe  |