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 VELL API NO.
District II	OIL CONSERVATION DIVISION		0-025 -9 393
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE 🛣 FEE 🗌 . State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS			. Lease Name or Unit Agreement Name
(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		CII I	State A A/C 1
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			. Well Number 27
2. Name of Operator		9	. OGRID Number 194849
Petrohawk Operating Company			
3. Address of Operator 1000 Louisiana, Suite 5600, Houston, Texas 77002			0. Pool name or Wildcat almat; Tan-Yts-7 RVRS (PRO GAS)
4. Well Location			alliat, Tall-Tts-7 KVK3 (FKO GA3)
Unit LetterF:1650feet from theNorth line and1650feet from theWest			
Section 23	Township 23S Range		NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3360' Ground Elevation Pit or Below-grade Tank Application or Closure			
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK (X) PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON		MMENCE DRILLI	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
OTHER:	Г	HER:	П
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.			
of recompletion.			
Start Date 2/2007			2425262728293
Start Date 3/2007 Clean out well – partial Model D packer at 3511'			
Run liner through Seven Rivers Formation			
OAP in Tansill, Yates and Seven Rivers			
OAP in Tansill, Yates and Seven Rivers Fracture stimulate in one stage			
			Constitution of
			A SI SI LIOL 8
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 Show Va	ush TITLE Prod	uction Analyst	DATE 2/16/07
Turns on against a series of the series of t		<u> </u>	
Type or print name Sheila Vaughn E-mail address: svaughn@petrohawk.com Telephone No. 832-369-2109 For State Use Only			
OC FIELD REPRESENTATIVE WITH THE LIVE OF THE PROPERTY OF THE P			
APPROVED BY: A QUI W. WIND TITLE TITLE TITLE TO ANAMAGEN DATE OF APPROVED BY: APPRO			
Conditions of Approval (if any):			

