Submit 3 Copies To Appropriate District			Form C-103	
Office District I			May 27, 2004 WELL API NO.	
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONCEDUATION	N DIVICION	30-025-0	)9296
1301 W. Grand Ave., Artesia, NM 88210	1 W. Grand Ave., Artesia, NM 88210 trict III 1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE <b>x</b> FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	,		6. State Oil & Gas I	Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			7. 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 PROPOSALS.)			STATE A A/C 1	nit Agreement Name:
1. Type of Well:			8. Well Number	
Oil Well Gas Well X Other			9. OGRID Number	
2. Name of Operator PETROHAWK OPERATING COMPANY			9. OGRID Number 194849	
3. Address of Operator			10. Pool name or Wildcat	
1000 LOUISIANA, SUITE 5600, HOUSTON, TEXAS 77002			LANGLIE MATTIX; 7 RVRS-Q-GRAYBURG	
4. Well Location				
Unit Letter F:	1980 feet from the NO	line and	1980 feet from	the WEST line
Section 10		Range 36E	NMPM	County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3460' GR				
Pit or Below-grade Tank Application	or Closure			
Pit type Depth to Groundwater .	Distance from nearest fresh	h water well Dis	tance from nearest surfac	e water
Pit Liner Thickness: mil	Below-Grade Tank: Volume.	bbls; Construction	on Material	
12. Check A NOTICE OF INTE	appropriate Box to Indicate ENTION TO: PLUG AND ABANDON		Report, or Other SEQUENT REP	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLI	NG OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		, <u></u> ,
OTHER:		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.  Drillout CIBP@3600' and swab test Additionally perforate within the Langlie Mattix:7 RVRS-Q-Grayburg pool Acidize new pay Put on production  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-				
I hereby certify that the information at grade tank has been/will be constructed or constructed	pove is frue and complete to the losed according to NMOCD guideline	s , a general permit [	or an (attached) altern	ertify that any pit or below- native OCD-approved plan DATE
Type or print name SHEILA VAUSHN	) E-n	nail address:	<b>SVAUGHN@PETROHAWK</b> Teleph	.COM one No. 832-369-2109
For State Use Only	المنداران			) 11 as a
APPROVED BY	v. wme ou	FIELD REPRESENTAT	TVE 11/07: T	ATE <u> </u>
Conditions of Approval, if any:			IVE II/STAFF MANA	GE#

