

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. 30-025-09235
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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 State A A/C 1
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		8. Well Number 46
2. Name of Operator Petrohawk Operating Company		9. OGRID Number 194849
3. Address of Operator 1000 Louisiana, Suite 5600 Houston TX 77002		10. Pool name or Wildcat Lanlie Mattix 4 Rvrs Queen GB
4. Well Location Unit Letter _____ L _____ : 1980 _____ feet from the _____ South _____ line and _____ 660 _____ feet from the _____ West _____ line Section 3 Township 23S Range 36E NMPM County Lea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3425'		
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:		SUBSEQUENT REPORT OF:	
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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Run tbg & tag CIBP @ 3600'. Spot 35' cmt. Pull tbg to 3565' & circulate hole w/ gel brine. Pull tbg @ 2875'. Spot 25 sks cmt 2875'-2675'. Pull tbg. Run wireline & perf @ 1475'. Run tbg, pkr. Squeeze perf 1475' w/ 55 sks cmt. & displace to 1275'. WOC. Run wireline & tag TOC 1180' (OCD witness tag). Pull tbg. Run wireline & perf @ 390'. Pump 110 sks cmt dn csg & circulate cmt out surface. Hole standing full. Cut off wellhead & anchors. RDMO.

8/3/06

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.



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 _____ TITLE Production Foreman DATE 9-20-07

Type or print name Joel Sisk E-mail address: jsisk@petrohawk.com Telephone No. 505-394-2574

For State Use Only

APPROVED BY: Hayden Wink TITLE OCD FIELD REPRESENTATIVE / STAFF MANAGER DATE OCT 01 2007
Conditions of Approval (if any):