Office	e of New Mexico	Form C-103
District I Energy, Mine	erals and Natural Resources	May 27, 2004 WELL API NO.
1625 N. French Dr , Hobbs, NM 88240  District II	ERVATION DIVISION	30 – 025 – 21082
1501 W. Grand 71.C., 711.C.sta, 141.002.10	outh St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd , Aztec, NM 87410	ta Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
District IV 1220 S St Francis Dr., Santa Fe, NM	u 1 0, 1 1111 0 / 5 0 5	
87505 SUNDRY NOTICES AND REPORTS ON WELLS		OG 1529  7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		Antelope Ridge Unit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		
1. Type of Well: Oil Well Gas Well Other		(Unit 891008492B)  8. Well Number
		3
2. Name of Operator		9. OGRID Number
BOLD ENERGY, LP  3. Address of Operator		233545  10. Pool name or Wildcat
·		Antelope Ridge; Morrow
415 W. Wall, Suite 500 Midland, Texa	s 79701	Antelope Ridge, Morrow
Unit Letter K: 1980 feet from the South line and 1650 feet from the West line Section 34 Township 238 Range 34E NMPM County Lea 12314151677		
3468' GR		
The Below-grade Tank Application of Closure (1974)		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water surface		
THE LINE THICKNESS. IIII DEIOW-Grade Tank. Volume Dois, Construction Material Construction Construction Construction Construction Construction Constructio		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data cos states		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A		<u> </u>
PULL OR ALTER CASING MULTIPLE COMP		<del></del>
OTHER:	OTHER:	Morrow Stimulation
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.		
12/22/2006: Began operations to re-perf and stimulate Morrow intervals. POOH w/tbg. Cut over and retrieve		
packer. <b>1/11/2007:</b> Perforate as follows using 4-1/2" expendable guns: 12,948' - 12,959'; 13,172' - 13,177'; 4 spf 120° phasing 0.44" EHD. TIH w/ packer on 3-1/2" workstring. <b>1/13/2007:</b> Frac'd as follows: established		
injection at 2.1 bpm at 3,580 psi. Shutdown for ISIP = 3,289 psi. FG = 0.692 psi/ft. Pumped 30# lightning fluid +		
30Q N2 with 20/40 CarboProp from 0.52 to 6.93 ppa. Total load to recover = 1,077 bbls. Total proppant placed =		
76,100 lbs. Total N2 = 870 mscf. Well died during flowback. POOH w/ workstring and packer. 1/22/2007: Ran production tubing and packer: 420 jts 2-3/8" 4.7# L-80 tbg + on/off tool w/ 1.81" F profile, Lockset Packer, 10 ft		
tailpipe w/ 1.78" R profile and WL re-entry guide at 12,770'.1/25/2007: SITP = 200 psi. Blow down and swab. IFL		
= 4,400'. 12 runs - 64 bbls. SDFN. 1/26/2007: SITP = 1,200 psi. Blow down. No fluid. Swab. IFL = 4,600'. 12 runs		
<ul> <li>- 66 bbls. RDMO. 1/30/07: Put well back to scattered. 7 runs - swabbed dry recovered</li> </ul>	sales. <b>3/29/2007:</b> Swab well. S L16 bbls. Install plunger lift. <i>4/</i>	SITP = 50 psi. SICP = 0 psi. IFL = 1000'
Reset tubing stop to 9,500'. 6/21/2007: Res	set tubing stop at 10,500'. <b>Curr</b> e	ent wellbore diagram attached.
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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 Operations Engineering Manager DATE 11/14/07		
Type or print name Shannon L. Klier E-mail address: shannon.klier@boldenergy.com Telephone No. 432 / 686-1100		
For State Use Only		
For State Use Only  Al- No Construct Supervisor/General Plansager FER 0.7 2000		
APPROVED BY: Chins Uslians TITLE DATE DATE  Conditions of Approval (if any):		

