

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. 30-025-38822
5. Indicate Type of Lease P
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name JAL 3 AGI
8. Well Number 001
9. OGRID Number 241472
10. Pool name or Wildcat

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)

1. Type of Well: Oil Well Gas Well Other (injection)

2. Name of Operator
SOUTHERN UNION GAS SERVICES, LTD

3. Address of Operator
301 COMMERCE SUITE 700, FT WORTH TX 76102

4. Well Location
 Unit Letter E : 1550 feet from the N line and 1000 feet from the W line
 Section 33 Township 24S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3268 GR

Pit or Below-grade Tank Application or Closure

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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: adjust location due to utilities <input checked="" 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.

Location had to be adjusted due to utilities at the plant. Actual Location will be as correctly shown on C-102 ; 1550FNL 1000FWL.

The correct Latitude and Longitude for this location are as shown on the plat (C-102). LAT 32°10'36.70"N LONG 103°10'23.19"W.

The Latitude and Longitude on the C-144 is incorrect as it related to the original location which had to be changed

Originally approved C-101 showed location as 1570FNL 1050FWL. Chris Williams of Hobbs OCD advised of change on 6/9/08 11am

RECEIVED

Drilling operations scheduled to begin approximately June 19, 2008

HOBBS OCD

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 Consultant to SUGS DATE 6/9/2008

Type or print name Alberto A. Gutierrez E-mail address: aag@geolex.com Telephone No. 505-842-8000

For State Use Only

APPROVED BY: Chris Williams TITLE Dist. Supv. DATE 6/10/08

Conditions of Approval (if any):