

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, Mineral and Natural Resources

Form C-103
May 27, 2004

RECEIVED
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
APR 17 2008
HOBBS OCD

WELL API NO. 30-041-20647
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 257420
7. Lease Name or Unit Agreement Name MILNESAND UNIT
8. Well Number MSU # 522
9. OGRID Number 257420
10. Pool name or Wildcat MILNESAND (SAN ANDRES)

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

2. Name of Operator
EOR OPERATING COMPANY

3. Address of Operator
ONE RIVERWAY, SUITE 610, HOUSTON, TX 77056

4. Well Location
Unit Letter b : 90 feet from the NORTH line and 1360 feet from the EAST line
Section 13 Township 8S Range 34E NMPM County ROOSEVELT

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4247' GL

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:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING MULTIPLE COMPL

OTHER: _____

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. P AND A
CASING/CEMENT JOB

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.

START DATE: 2/5/08

- 1.) RU, POOH W/ PUMP, RODS & TBG. RIH W/ BIT & SCRAPER TO BOTTOM & CLEAN OUT FILL.
- 2.) ADD PERFORATIONS 4524' - 4614' 4JSPF.
- 3.) RIH W/ BIT & SCRAPER TO TD. TOH W/ BIT & SCRAPER.
- 4.) RIH W/ 5 1/2" RTTS PKR. TEST ANNULUS TO 500 PSI. TOH W RTTS PKR.
- 5.) TIH W/ HES PPI TOOL. ACIDIZED PERFORATIONS W/ 9400 GALS OF 15% HCL ACID. TOH W/ HES PPI TOOL.
- 6.) RIH W/ NEW 2 3/8" J-55 TBG., ROD PUMP, NEW SUCKER RODS, NEW POLISH ROD & LINER, PUMPING "T" & STUFFING BOX.
- 7.) NIPPLE UP WELL HEAD. HANG WELL ON.
- 8.) RD, MOVE OFF PULLING.

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 *Lawrence A. Spittler, Jr.* TITLE Sr. Well Operations Supervisor DATE 4/4/08

Type or print name: Lawrence A. Spittler, Jr. E-mail address: lspittler@enhancedoilres.com Telephone No.: 432-687-0303
For State Use Only

APPROVED BY: *Chris Williams* TITLE OCD DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUN 27 2008
Conditions of Approval (if any): _____