

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

RECEIVED

Oil, Gas, and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

HOBBS OCD

WELL API NO.

30-025-03610

5. Indicate Type of Lease

STATE FEE

6. State Oil & Gas Lease No.

257420

7. Lease Name or Unit Agreement Name
CROSSROADS SILURO DEV Ut

8. Well Number

304

9. OGRID Number

257420

10. Pool name or Wildcat

CROSSROADS SILURO DEVONIAN

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

EOR OPERATING COMPANY

3. Address of Operator

ONE RIVERWAY, SUITE 610, HOUSTON, TX 77056

4. Well Location

Unit Letter A : 660 feet from the NORTH line and 660 feet from the EAST line

Section 27 Township 9S Range 36E NMPM County LEA

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

4027' 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:

- 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.

EST. START DATE: 8/18/08

LOWER INJECTION PKR AS PER OCD AND CONDUCT MECHANICAL INTERGRITY TEST.

- 1.) RU WORKOVER UNIT. ND WELLHEAD. NU BOP'S.
- 2.) RELEASE EXISTING 5 1/2" INJECTION PKR @ 11,310'.
- 3.) TOH W/ INJECTION TBG & PKR.
- 4.) TIH W/ NEW AND OR REBUILT 5 1/2" INJECTION PKR.
- 5.) CIRCULATE PACKER FLUID.
- 6.) SET PKR WITHIN 100' OF TOP PERFORATION APPROXIMATLEY @ 12,000' & TEST ANNULUS TO 500 PSI.
- 7.) SCHEDULE MIT WITH OCD. CONDUCT MIT.
- 8.) NIPPLE UP WELL HEAD. RD, MOVE OFF PULLING.
- 9.) RETURN WELL TO WATER INJECTION.
(5 1/2", 17 & 20# CSG @ 12,118', 9-5/8", 36 & 40# CSG @ 4668', PERFS 12,089'-12,095', 2 7/8" TBG, PKR SET @ 11,310')

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 Sr. Well Operations Supervisor DATE 7/24/08

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: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

OCD DISTRICT SUPERVISOR/GENERAL MANAGER

AUG 07 2008