Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
Office District I 1625 N. French Dr., Hobbs, NM 88240	May 27, 2004
	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88216 B 1 8 QODSCONSERVATION DIVISION	30-025-39130
District III	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 8 10BBSOCD 220 South St. 11 ancis D1.	STATE S FEE
District IV 1220 S St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 8/505	6. State Oil & Gas Lease No. V-07612
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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)	HIGHTOWER STATE UNIT
1. Type of Well: Oil Well Gas Well Other	8. Well Number 3
2. Name of Operator MURCHISON OIL & GAS, INC.	9. OGRID Number 015363
1	7. OGRID Nullioci 013303
3. Address of Operator 1100 MIRA VISTA BLVD.	10. Pool name or Wildcat
PLANO, TX. 75093-4698	ideat Miss. Moramec Osage
4. Well Location	(700-(*
Unit Lotter I 1750 See See the COUTTY I' 1 222	
Section 27 Township 12S Range 33E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
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 PLUG AND ABANDON REMEDIAL WOR	K ALTERING CASING
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	
District Control of the control of t	
OTHER: Change to gas well 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.	
Manapiron Oil & Con Inc.	
Murchison Oil & Gas, Inc. request to change this well from an oil well to a gas well pe	r attached Administrative Order NSL-5982.
I hereby cartify that the information above is true and complete to the first true and complete	
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 \infty, a general permit \int or an (attached) alternative OCD-approved plan \infty.	
SIGNATURE a. arnold Nall of TITLE Vice President O	perations DATE 2/4/2009
	DISTE 2/4/2007
Type or print name A. Arnold Nall E-mail address: arnall@jdmii.com	Telephone No. (972) 931-0700
For State Use Only	(1.2)/22.0/00
APPROVED BY PETROLEUM EN	CINES AAAA
APPROVED BY: TITLE	DATE MAR 0 5 200
Conditions of Approval (if any):	

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