

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 88021
District IV
1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico
Department of Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
June 19, 2008

RECEIVED

MAY 15 2009
HOBBSD

WELL API NO. 30-025-28083
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. SWD 119
7. Lease Name or Unit Agreement Name STATE 'AJ'
8. Well Number #1
9. OGRID Number 168776
10. Pool name or Wildcat DEVONIAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3806 GR

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 SWD

2. Name of Operator
BASIN ALLIANCE LLC

3. Address of Operator
P.O. Box 1378 Hobbs, New Mexico 88241

4. Well Location
Unit Letter G : 2310 feet from the North line and 2310 feet from the EAST line
Section 33 Township 18S Range 36E NMPM LEM County

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> P AND A <input type="checkbox"/>
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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.

MIRU MESA WELL SERVICE. Release packer and pull tubing. Run tbg testers to test tbg and replace bad tubing.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Hugo Naegel Jr TITLE Member DATE 5-14-09

Type or print name Hugo Naegel Jr E-mail address: hnaegel55@mywdo.com PHONE: 392-5999
For State Use Only

APPROVED BY: Cory W. Hill TITLE DISTRICT 1 SUPERVISOR DATE MAY 15 2009
Conditions of Approval (if any):