

RECEIVED

MAY 12 2009

HOBBSD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO. 30-005-27962
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No
7. Lease Name or Unit Agreement Name CATO SAN ANDRES UNIT
8. Well Number 517
9. OGRID Number 248802
10. Pool name or Wildcat Cato; 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator CANO PETRO OF NEW MEXICO, INC.	
3. Address of Operator 801 CHERRY STR, UNIT 25 SUITE 3200 FT WORTH TX 76102	
4. Well Location Unit Letter <u>E</u> <u>1375</u> feet from the <u>N</u> line and <u>1290</u> feet from the <u>West</u> line Section <u>11</u> Township <u>08S</u> Range <u>30E</u> NMPM County <u>Chaves</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4134 (GL)	

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 ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

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

OTHER: ☐OTHER: Install submersible pump ☒

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

2/11/2009

MIRU pulling unit

Pulled rods and pump. Pulled tubing. Rigged up sub pump. RIH w/ sub pump and 3321' of 2-7/8" J-55 tubing. RDMO pulling unit. Hooked up electricity and began pumping well with new pump.

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 Collin Strawn TITLE Engineer DATE 5-4-09Type or print name Collin Strawn E-mail address: PHONE: 817-698-0900

For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE MAY 14 2009

Conditions of Approval (if any).