Submit 3 Copies To Appropriate District Office		State of New Mexico		Form C-103 May 27, 2004
District I 1625 N French Dr., Hobbs, NM 88			WELL API NO.	
1625 N French Dr., Hobbs, NM 888 CENED District II 1301 W Grand Ave, Artesia, NM 88210 OIL CONSERVATION DIVISION			30-005-1	
District III JUN 1 9 2009 220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			5. Indicate Type of Leas	se FEE 🛛 🗸
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			6. State Oil & Gas Leas	T
District IV 1220 S. St. Francis Dr., Santa Fe, NMOBBS	UUL		28075	
07303	AND REPORTS ON WEL	LS	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.)			Cato San Andres Unit	
1. Type of Well: Oil Well Gas Well Other			8. Well Number 55	
2. Name of Operator			9. OGRID Number	
Cano Petro of New Mexico, Inc. 3. Address of Operator 801 Cherry Street Unit 25 Suite 3200			248802 10. Pool name or Wildcat	
Fort Worth Texas 761023. Address of Operator			Cato San Andres	
4. Well Location				
	feet from the	S line and	1980 feet from the	Wline
Section 11	Township 8S	Range 30E		County Chavez
11	Elevation (Show whether I	OR, RKB, RT, GR, etc.,	GR 4134	
	П			
Pit or Below-grade Tank Application ☐ or Clos Pit type Depth to Groundwater_		h water well Dis t	ance from nearest surface wat	er
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 WORK ☐ ALTERING CASING ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐				
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB				
_	_	OTHER:	swab	\bowtie
OTHER: Swab 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.				
Conducted swabbing test to evaluate well.				
No. 22, 2000 11, 1 and 11, 12, 14, 11, 11, 20, 21, and 11, 11, 11, 20, 21, and 11, 21, 21, 21, 21, 21, 21, 21, 21, 21,				
May 22, 2009- swabbed well and made 4 bbls of oil and 11 bbls of water with a swabbing unit for 4 hrs.				
May 23, 2009- swabbed well and made 1 bbls of oil and 14 bbls of water with a swabbing unit for 4 hrs.				
All oil and water made was hauled to battery 2 and pumped thru separator.				
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 \square , a general permit \square or an (attached) alternative OCD-approved plan \square .				
SIGNATURE MUTHULLA	Wy TITLE	Regulatory Coordinate	atorDAT	TE 4/8/09
Type or print name	U E-mail	address:	Telephoi	ne No.
For State Use Only	1.1		_	111 N + = 0000
APPROVED BY: Carry W. JUN 2 3 2009				
Conditions of Approval (if any): FOR RECORD ONLY				