14	Ottore	State of 14ew Mexico		Form C-103	
	District I Energy, Mi	right Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.	
	225 N. French Dr., Hobby 225 N. French Dr., Ho			30-005-20197	
	1301 W Grand Ave., Artesia, NM 882107 2000 OIL CON	OIL CONSERVATION DIVISION Strict III 1220 South St. Francis Dr.		5. Indicate Type of Lease	
				STATE FEE E Pea	
	District IV HOBBSOCD Se 1220 S. St. Francis Dr., Santa Fe, NM	anta Fe, NM 87505	- [	6 State Oil & Gas Lease No	
	720 S. St. Francis Dr., Santa Fe, NM				
	SUNDRY NOTICES AND REPORTS ON WELLS			7 Lease Name or Unit Agreement Name	
١	(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			Cato San Andres Unit	
ŀ	PROPOSALS)			O W/ 11 N 1	
ļ	Type of Well Oil Well 🗵 Gas Well 🗌 Other			1/0	
١	<ol> <li>Name of Operator Cano Petro of New Mexico, Inc.</li> </ol>			9 OGRID Number 248802	
l	3. Address of Operator			10. Pool name or Wildcat	
İ	801 Cherry Street Unit 25 Suite 3200	Fort Worth, TX 7610	2	Cato, San Andres	
ſ	4. Well Location				
١	Unit Letter J 1980 feet from the S line and 1980 feet from the E line				
Section 33 Township 08S Range 30E NMPM County Chavez					
44.0	11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
Ĺ	4144 GR				
	12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
	NOTICE OF INTENTION TO			EQUENT REPORT OF:	
	PERFORM REMEDIAL WORK PLUG AND ABA			<del>_</del>	
	TEMPORARILY ABANDON ☐ CHANGE PLAN PULL OR ALTER CASING ☐ MULTIPLE COM			LING OPNS P AND A	
	PULL OR ALTER CASING   MULTIPLE CONDOWNHOLE COMMINGLE	MPL 🗌 CASING/C	CIVICIAI	JOB	
	DOWN IOLE COMMINICALE				
_	OTHER: Swab Well				
	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					
	of recompletion				
				•	
	Swab Test on May 5, 2009 Swabbed for 4hrs made 1 bbl of oil and 5 bbls of water.				
	Swab Test on May 6, 2009 Swabbed for 4hrs made 1 bbl of oil and 6 bbls of water.				
	<u></u>				
S	pud Date: 1/19/68	Rıg Release Date:			
	1/19/00	rag release Bute.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
S	IGNATURE WILL MALLY	_TITLE_Regulatory (	Coord	inator DATE 5/30/09	
	ype or print name Cindy Chavez or State Use Only	_ E-mail address.		PHONE 817-698-0900	
±.	DISTRICT 1 SUPERVISOR				
	APPROVED BY TIME TITLE DATE SEP 2-1 2009				
C	Conditions of Approval (if any)				