

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies District I 1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S St Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <div style="font-size: 2em; opacity: 0.5; transform: rotate(-15deg); position: absolute; top: 50px; left: 20px;">RECEIVED</div> <div style="font-size: 1.5em; position: absolute; top: 80px; left: 20px;">MAY 12 2008</div> <div style="font-size: 1.5em; position: absolute; top: 100px; left: 20px;">HOBBS</div> <b>Oil Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505	<b>Form C-105</b> Revised June 10, 2003
WELL API NO. <b>30-005-28013</b>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>		State Oil & Gas Lease No.
1a. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____  b. Type of Completion: NEW <input checked="" type="checkbox"/> WORK <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF <input type="checkbox"/> WELL OVER BACK RESVR. <input type="checkbox"/> OTHER _____		7 Lease Name or Unit Agreement Name  <b>Cato San Andres Unit</b>
2. Name of Operator  <b>Canio Petro of New Mexico, Inc.</b>		8. Well No  <b>562</b>
3. Address of Operator  <b>801 Cherry Street, Unit 25 Suite 3200 Fort Worth, TX 76102</b>		9. Pool name or Wildcat  <b>Cato San Andres</b>
4. Well Location  Unit Letter <b>M</b> : <b>130</b> Feet From The <b>South</b> Line and <b>140</b> Feet From The <b>West</b> Line		
Section: <b>12</b> Township: <b>08S</b> Range: <b>30E</b> NMPM: _____ County: <b>Chaves</b>		
10. Date Spudded <b>3/21/08</b>	11. Date T.D. Reached <b>3/26/08</b>	12. Date Compl. (Ready to Prod.) <b>N/A</b>
13. Elevations (DF& RKB, RT, GR, etc.) <b>4163</b>		14. Elev. Casinghead
15. Total Depth <b>3370</b>	16. Plug Back T.D.	17. If Multiple Compl. How Many Zones?
18. Intervals Drilled By		19. Producing Interval(s), of this completion - Top, Bottom, Name <b>N/A</b>
20. Was Directional Survey Made <b>No</b>		21. Type Electric and Other Logs Run <b>N/A</b>
22. Was Well Cored <b>No</b>		23. <b>CASING RECORD (Report all strings set in well)</b>
CASING SIZE <b>8 5/8</b>	WEIGHT LB/FT <b>24#</b>	DEPTH SET <b>560</b>
HOLE SIZE <b>12 1/4</b>	CEMENTING RECORD <b>450</b>	AMOUNT PULLED
<b>Open Hole</b>		
24. <b>LINER RECORD</b>		25. <b>TUBING RECORD</b>
SIZE	TOP	BOTTOM
26. Perforation record (interval, size, and number)  <b>None</b>		27. <b>ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.</b>
		DEPTH INTERVAL
		AMOUNT AND KIND MATERIAL USED
		<b>3398-</b>
		<b>Acid Frac</b>
		<b>3830</b>
		<b>15,000 gal 15%</b>
28. <b>PRODUCTION</b>		
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)
		Well Status (Prod. or Shut-in) <b>Shut-in Dry Hole</b>
Date of Test	Hours Tested <b>24 hrs.</b>	Choke Size
Prod'n For Test Period	Oil - Bbl	Gas - MCF
Water - Bbl.	Gas - Oil Ratio	
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate
Oil - Bbl.	Gas - MCF	Water - Bbl.
Oil Gravity - API - (Corr)		
29. Disposition of Gas (Sold, used for fuel, vented, etc)		Test Witnessed By
30. List Attachments <b>NO Logs</b>		
31. Signature <i>Shana McNeal</i> Printed Name <b>Shana McNeal</b> Title <b>Production Assistant I</b>		
E-mail Address: <b>shana@canopetro.com</b> Date: <b>4/1/08</b>		

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinbry	T. Gr. Wash	T. Dakota	
T. Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo	T.	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 3, from.....to.....

No. 2, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology