Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM SAECEIVED	Minerals and Natural Resources	June 19, 2008 WELL API NO.
District II 1301 W. Grand Ave. Artesia NM 88210 OIL CO	NSERVATION DIVISION	30-005-27963
District III MAY 12 2009122	20 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE 🔀
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St Francis Dr, Santa Fe, NM 87505	Santa Fe, NM 87505	6 State Oil & Gas Lease No.
SUNDRY NOTICES AND REP		7 Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL C DIFFERENT RESERVOIR. USE "APPLICATION FOR PERI		CATO SAN ANDRES UNIT
PROPOSALS.) 1 Type of Well. Oil Well 🗶 Gas Well	Other	8. Well Number 518
2 Name of Operator		9 OGRID Number
CANO PETRO OF NE 3 Address of Operator	W MEXICO, INC.	248802 10 Pool name or Wildcat
801 CHERRY STR, UNIT 25 SUITE 32	00 FT WORTH TX 76102	Cato;San Andres
4 Well Location		
Unit Letter F 1380 feet from the N line and 2490 feet from the W line		
	Imship 08S Range 30E (Show whether DR, RKB, RT, GR, etc.,	NMPM County Chaves
11. Elevatori	4146 (GL)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION T	O: SUB	SEQUENT REPORT OF:
	BANDON 🔲 🛛 REMEDIAL WOR	K 📃 ALTERING CASING 🔲
TEMPORARILY ABANDON CHANGE PL/ PULL OR ALTER CASING MULTIPLE C		
DOWNHOLE COMMINGLE		
OTHER:		ll submorsible nump 🔽
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.		
or recompletion.		
2/15/2009		
MIRU pulling unit		
Pulled rods and pump. Pulled tubing. Rigged up sub pump. RIH w/ sub pump and		
3316' of 2-7/8" J-55 tubing. RDMO pulling unit. Hooked up electricity and		
began pumping well with new pump.		
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Spud Date	R1g Release Date	
I hereby certify that the information above is true and complete to the best of my knowledge and belief		
SIGNATURE Collon Spran	_{TITLE} Engineer	
	111100	DATE 5-4-09
Type or print name Collin Strawn For State Use Only	E-mail address	PHONE: 817-698-0900
	DISTRICT 1 SUPE	RVISOFI NOV 1 8 2009
APPROVED BY. <u>Comp</u> (if any)	TITLE	DATE

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