Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	June 19, 2008
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II		30 025 39404
1301 W. Grand Ave., Artesia, DIL CONSERVATION DIVISION District III 1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd Aztec NM 8/410		STATE FEE
District IV 1220 S St Francis Dr., Santa Fe, NM 87505		6. State Oil & Gas Lease No.
87505 LIONE	SSOCT	VB-1128
SUNDRYNO	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
PROPOSALS)	JCATION FOR PERMIT" (FORM C-101) FOR SUCH	Moore Cowbell 27 State
1. Type of Well: Oil Well	Gas Well Other	8. Well Number #1H
2. Name of Operator		9. OGRID Number
Caza Operating, LLC,		249099
3. Address of Operator		10. Pool name or Wildcat
200 N. Loraine, Suite 1550, Midland, Texas 79701		Caprock Wolfcamp, East
4. Well Location	, , , , , , , , , , , , , , , , , , , ,	1 1/
	. 660 fact from the Courth line and O	00 foot from the Foot
Unit Letter P	: 660 feet from the South line and 99	
Section 27	Township 12 South Range 32 East	
	1	
4335 GR		
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/CEMEN	IT JOB 🛛
DOWNHOLE COMMINGLE		
		_
OTHER:	OTHER:	
	pleted operations. (Clearly state all pertinent details, ar	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion		
or recompletion.	-	
11/24/2009_ Drilled 30 inch	Conductor hole to 120 ft below Gr. Set 16	inch ¼" wall 42 lb Line Pipe as
conductor. Cemented same	to surface with 200 sks Redi mix concrete.	Mouse hole drilled to 65 ft to
accommodate a 90 ft shuck for top drive system.		
	201 top unit systems	
Spud Date:	Rig Release Date:	
•		
I haraby cartify that the information		
Thereby certify that the information	s shows in true and complete to the best of my knowled	and hallof
/ 1/	n above is true and complete to the best of my knowledge	ge and belief.
	n above is true and complete to the best of my knowledge	ge and belief.
SIGNATURE A Short b		
SIGNATURE KARALA	TITLE Operations Manager	ge and belief. DATE <u>11/25/2009</u>
-	White Operations Manager	DATE <u>11/25/2009</u>
Type or print name Richard L. Wr	White Operations Manager	
-	TITLE Operations Manager E-mail address: rwright@caza	DATE <u>11/25/2009</u> apetro.com PHONE: <u>432 682 7424</u>
Type or print name Richard L. Wr For State Use Only	TITLE Operations Manager E-mail address: rwright@caza	DATE 11/25/2009 apetro.com PHONE: 432 682 7424 FEB 0 3 2010
Type or print name Richard L. Wr	TITLE Operations Manager E-mail address: rwright@caza	DATE <u>11/25/2009</u> apetro.com PHONE: <u>432 682 7424</u>