Submit 1 Copy To Appropriate District State Office		State of New Mex	e of New Mexico		Form C-103	
District I			rals and Natural Resources		October 13, 2009 WELL API NO.	
1625 N French Dr, Hobbs, NM 88240 District II 1301 W Grand Ave, Artesia, NM 88210  OTL CONSERVATION DIVISION				30-025-22239		
				5. Indicate Type of Lease		
1000 Rio Brazos Rd , Aztec, NM 87406 U L Luis Santa Fe NM 87505				STATE FEE X  6. State Oil & Gas Lease No.		
1220 S St Francis Dr , Santa Fel MINBBSOCD						
87505 SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Na.	me 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)				Sanders AOU		
1. Type of Well: Oil Well  Gas Well  Other				8. Well Number 1		
2. Name of Operator EnerVest Operating, L.L.C. ✓				9. OGRID Number 143199		
3. Address of Operator 1001 Fannin, Suite 800 Houston, TX 77002				10. Pool name or Wildcat Saunders Permo Upper Penn		
4. Well Location						
ł	Letter F : 198	icct from the	fine and		et from the West line	
Sect			nge 33E	NMPM	County Lea V	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4185' 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 X CHANGE PLANS COMMENCE DRILLING OPNS P AND A						
	PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB					
DOWNHOLE COMMINGLE						
OTHER			OTHER			
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of						
proposed completion or recompletion.						
EnerVest Operating, L.L.C. respectfully requests approval to run an MIT on						
this well, with plans to request Temporary Abandonment after the MIT, in						
order to further evaluate this well for future potential.						
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	0.04.07			40.0.0		
Spud Date:	8-31-67	Rig Release Da	ate:	10-8-67		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
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SIGNATURE Bridget Helfrich TITLE Regulatory Tech.  DATE 2-26-10						
Type or print name Bridget Helfrich E-mail address: bhelfrich@enervest.net PHONE: 713-495-6537						
For State Use Only						
APPROVED BY: DATE 3-4-10						
Conditions of Approval (if any)						

Conditions of Approval: Notify OCD district office 24 hours prior to running the TA pressure test.