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Submit 1 Copy To Appropriate District State of New Mex						
Office Energy, Minerals and Natur	al Resources October 13, 2009					
District I	WELL API NO. /					
District I 1625 N. French Dr., Hobbs, NM 8 District II 1301 W Grand Ave., Artesia, NM 88210 District III 1301 W Grand Ave., Artesia, NM 88210	30-025-33201					
1301 W Grand Ave., Artesia, NM 88210	5. Indicate Type of Lease					
District III APR 27 / UIII 1220 South St. Fland	$\Delta IS DI.$ STATE × FEE					
1000 R10 Brazos Rd, Aztec, NM 87410 Santa Fe, NM 873	6. State Oil & Gas Lease No.					
District IV 1220 S St Francis Dr., Santa Fe, NM 873	B-2148					
87505	D-2140					
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name					
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU	BACK TO A Caprock Maljamar Unit /					
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO	SUCH					
PROPOSALS)	8. Well Number 209					
1. Type of Well: Oil Well 🛛 Gas Well 🗌 Øther						
2. Name of Operator	9. OGRID Number 270265					
SandRidge Exploration and Production, LLC						
3. Address of Operator	10. Pool name or Wildcat					
123 Robert S. Kerr Ave, Oklahoma City, OK 73102	Maljamar Grayburg San Andres					
4. Well Location	/					
	1 1700 God Good the West line					
Unit Letter <u>N</u> : <u>949</u> feet from the <u>South</u>						
Section 20 Township 17S I	ange 33E NMPM Lea County					
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
4135' GR						
10 Ol 1 4						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
NOTICE OF INTENTION TO:						
PERFORM REMEDIAL WORK 🔲 PLUG AND ABANDON 🗌 🛛 REMEDIAL WORK 🛛 🛛 ALTERING CASING 🗌						
TEMPORARILY ABANDON 🔲 CHANGE PLANS 🗌						

TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE		CHANGE PLAN MULTIPLE COI			COMMENCE DRILLING OPNS.[CASING/CEMENT JOB [] PANDA	
OTHER:					OTHER: Hole in tubing/replace		\boxtimes
13 Describe proposed or (compl	eted operations.	(Clearly	state all	pertinent details, and give pertinen	t dates, including	estimated date

 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.

2/15/10 MIRU POH with pump & rods. POH with tubing. Hydrotest tubing. BIH to 6000#. Found holes. Replace 4 jts. RIH with 2 7/8, 6.5# J-55 tubing & set at 4513'.

2/16/10 RIH with rods & pump. Hung well on. Load tubing to 500#. OK. RDMO

Spud Date:	Rig Release Date:		
I hereby certify that the information above is true an	d complete to the be	est of my knowledge and belief.	
SIGNATURE MAN FOL	TITLE	Regulatory Manager	DATE4/21/10
Type or print name Terri Stathem E	E-mail address:	_tstathem@sdrge.com_ PHONE:	405-429-5682
For State Use Only APPROVED BY: Conditions of Approval (if any):	TITLE _S	TAN NGZ	DATE 4-22-10