

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
June 19, 2008

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (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.)		WELL API NO. 30-025-24341 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Sheridan Production Company, LLC		6. State Oil & Gas Lease No. NM-4160
3. Address of Operator 200 N. Loraine Ste. 530 Midland, TX 79701		7. Lease Name or Unit Agreement Name NVANU 5-B
4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>South</u> line and <u>860</u> feet from the <u>East</u> line Section <u>1</u> Township <u>17S</u> Range <u>34E</u> NMPM County <u>Lea</u>		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4022' GR		9. OGRID Number <u>252494</u>
		10. Pool name or Wildcat North Vacuum (Abo) ✓

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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

04/13/2010 Replace top jt. Of csg,
4/21/2010 RIH w/2-3/8" tbg and packer. Packer set @ 8644'. Run MIT to 520# for 30 minutes. Hook up injection line and put well back on injection.
E. L. Gonzales witnessed

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE James Bush TITLE Pumper DATE 04/22/2010

Type or print name James Bush E-mail address: jbush@sheridanproduction.com PHONE: 432 213-3400
For State Use Only

APPROVED BY: Carly W. Hill TITLE DISTRICT SUPERVISOR/GENERAL MANAGER DATE APR 23 2010
Conditions of Approval (if any):

