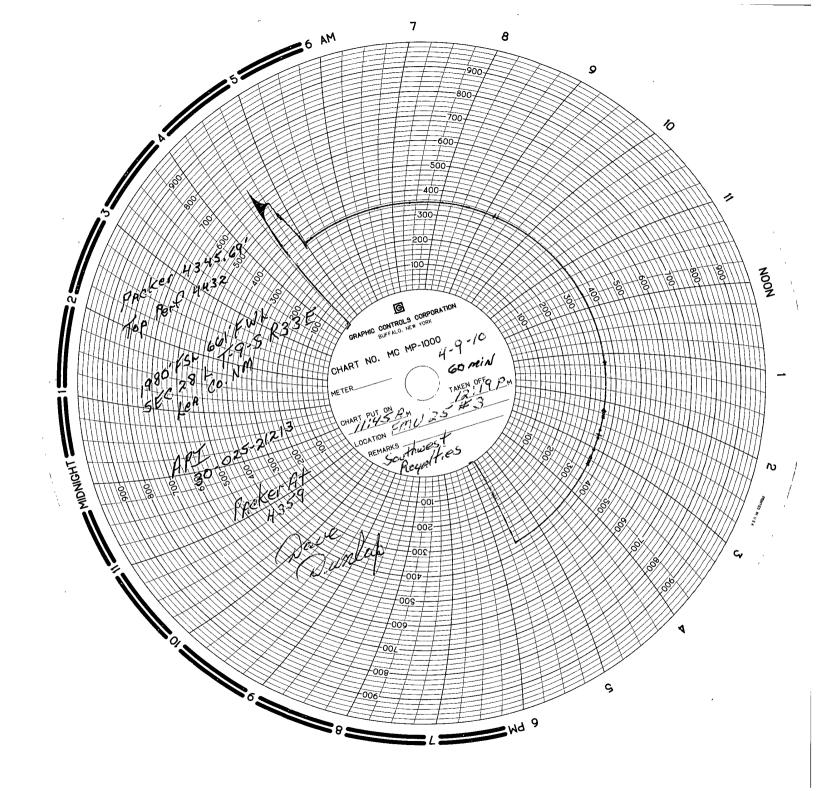
Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District 1 Energy, Minerals and Natural Resources		October 13, 2009
VI625 N. French Dr., Hobbs, NM 88240		WELL API NO. / 30-025-21213
TION WEST AND THE CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410 MAY 06 200220 South St. Francis Dr. September 197		STATE FEE S
1000 Rio Brazos Rd., Aztec, NM 87410 MAY 00 LOUIZZO SOUTH St. 17 Interes Dr. District IV 1220 S St. Francis Dr., Santa Fe, NM HOBBSOCD Santa Fe, NM 87505		6. State Oil & Gas Lease No. 58102
87505 SUNDRY NOTICES AND REPORTS ON WELLS		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		FLYING M SAN ANDRES UNIT
1. Type of Well: Oil Well Gas Well Other In		8. Well Number 253
2. Name of Operator		9. OGRID Number
SOUTHWEST ROYALTIES, INC. 3. Address of Operator		21355 10. Pool name or Wildcat
6 DESTA DRIVE, STE 2100, MIDLAND, TEXAS 79705		FLYING M SAN ANDRES UNIT
4. Well Location		
Unit Letter_ L :1980_feet from theSline and661feet from theWline		
Section 28 Township 9S Range 33E NMPM LEA County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4326' GL		
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		T JOB
DOWNHOLE COMMINGLE		
OTHER: DTHER: MIT		
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.		
Tested well 4/9/10. Chart attached.		
Spud Date: 6/1/65	Rig Release Date: 6/11/65	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE		
Type or print name Dawn M. Howard E-mail address: dhoward@claytonwilliams.com PHONE: 432/688-3267		
For State Use Only OC DISTRICT SUPERVISOR GENERAL MAY 0 7 2010		
APPROVED BY: TITLE DATE		
Conditions of Approval (if any):		
V		



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