

Submit 1 Copy To Appropriate District
Office
District I
1625 N French Dr., Hobbs NM 88240
District II
1301 W Grand Ave., Artesia NM 88210
District III
1090 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
October 13, 2009

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

WELL API NO 30-025-08007
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name New Mexico State BH Net State
8. Well Number 1
9. OGRID Number 16470 164070
10. Pool name or Wildcat Caprock Wolfcamp, East

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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Paladin Energy Corp.

3. Address of Operator

10290 Monroe Dr., Suite 301, Dallas, Texas 75229

4. Well Location

Unit Letter C : 660 feet from the North line and 1980 feet from the West line

Section 11 Township 12-S Range 32-E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4371' DR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☒ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS ☐ P AND A ☐
CASING/CEMENT JOB ☐

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.

Capw/35' Cmt
RTU pumping unit. Set CIBP at 8,275' above Top perforation at 8,360'. fill Casing with fluid. test 5-1/2" casing to 500# for 30 minutes. Record chart.

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:

David Plaisance

V.P. Exploration & Production

dplaisance@paladinenergy.com

DATE

9/17/10

Type or print name

E-mail address:

PHONE:

For State Use Only

APPROVED BY:

TITLE

STAFF MGR

DATE

9-16-10

Conditions of Approval (if any):

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

dm