

RECEIVED

OIL CONSERVATION DIVISION

NOV 22 2010 220 South St. Francis Dr.

HOBBBSUCU

Santa Fe, NM 87505

WELL API NO. 30-025-39945
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NLA State Unit
8. Well Number 1Y
9. OGRID Number 217955
10. Pool name or Wildcat Flying M Abo South

<p>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.)</p>	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator OGX Resources LLC	
3. Address of Operator P. O. Box 2064 Midland, Texas 79702	
4. Well Location Unit Letter <u>M</u> : <u>480</u> feet from the <u>South</u> line and <u>530</u> feet from the <u>West</u> line Section <u>18</u> Township <u>9S</u> Range <u>33E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4404'	

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: Ran 9 5/8" csg & cmt ☒

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.

11/17/10

Ran 79 jts 9 5/8", 36#, J-55, STC csg to 3166'. Cement with 1230 sxs 12.7#, 2.07 yield lead, 200 sxs, 14.8#, 1.33 yield tail. Circ 109 sxs to surf. Contacted DL Gonzales @ NMOCD.

Spud Date: 11/8/10

Rig Release Date:

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

SIGNATURE Shelley Bush TITLE Regulatory Analyst DATE 11/18/10

Type or print name Shelley Bush E-mail address: shelley@ogxresources.com PHONE: 432/685-1287

For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE NOV 23 2010

Conditions of Approval (if any):