

State of New Mexico
Energy, Minerals and Natural Resources

RECEIVED

OIL CONSERVATION DIVISION

NOV 29 2010

HOBBSDO

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-041-10146

5. Indicate Type of Lease

STATE ☒ FEE ☒

6. State Oil & Gas Lease No.

303378

7. Lease Name or Unit Agreement Name

Haley Chaveroo Unit

8. Well Number

16

9. OGRID Number

164557

10. Pool name or Wildcat

Chaveroo (San Andres)

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 ☒ INJECTION

2. Name of Operator

RIDGEWAY ARIZONA OIL CORP.

3. Address of Operator

200 N. Loraine, Suite 1440. Midland, TX 79701

4. Well Location

Unit Letter L : 1980 feet from the South line and 660 feet from the West lineSection 33 Township 7S Range 33E NMPM County Roosevelt

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

4435' DF

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 ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐OTHER: Temporally Abandoned Well ☒

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.

WELL IS A (T/A) TEMPORAIRLLY ABANDONED WATER INJECTOR.

1.) 11/17/08. CONDUCTED (MIT) MECHANICAL INTRGRTY TEST WITH OCD REP MAXEY BROWN AS A WITNESS. START TEST WITH 540 PSI. 30 MIN. FINAL TEST 535 PSI. TESTED GOOD.

(4 1/2" 10.5# CSG @ 4486', CIBP SET @ 4175'. PERFS 4274'-4369')

This Approval of Temporary

Abandonment Expires

Rig Release Date:

Start Date:

11/17/2010

11/17/2010

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

SIGNATURE

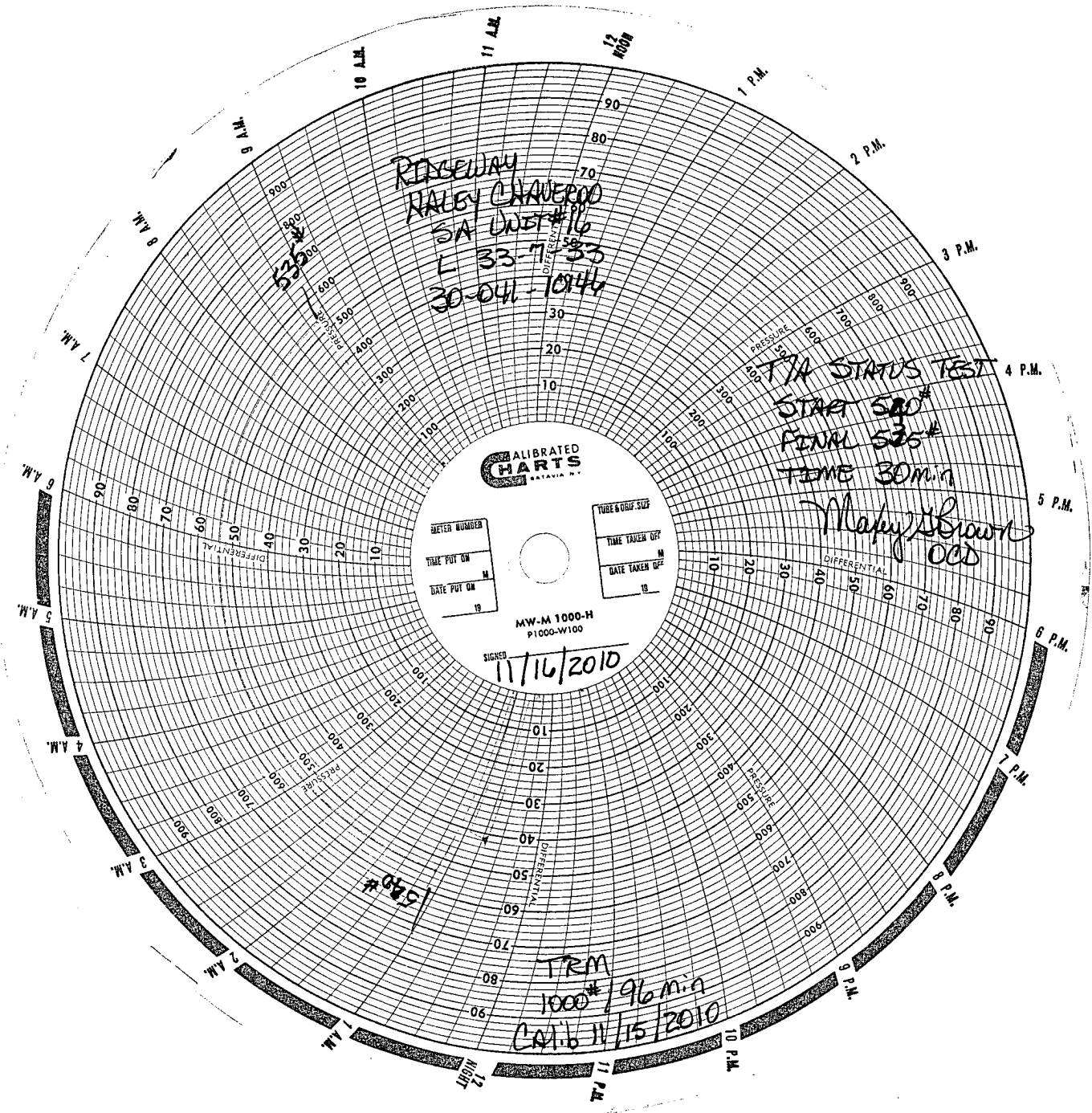
TITLE Sr. Well Operations SupervisorDATE 11/23/10Type or print name L.A. Spittler, Jr.E-mail address: lspittler@enhancedoilres.com PHONE: 432-687-0303

For State Use Only

APPROVED BY:

TITLE State MgrDATE 11-30-10

Conditions of Approval (if any):



RIDGEWAY
HALEY CHAUVERON
SA DIST #16
L 33-7-33
30-041-10146

T/A STATUS TEST
START 580*
FINAL 535*
TIME 30 min
Marty Brown
OCS



METER NUMBER
TIME PUT ON
DATE PUT ON

TUBE & GUP SIZE
TIME TAKEN OFF
DATE TAKEN OFF

MW-M 1000-H
P1000-W100

SIGNED
11/16/2010

TRM
1000* / 96 min
CALIB 11/15/2010

Malay CSA Unit #16