

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
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  
May 27, 2004

HOBBS OCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, NM 87505

MAY 23 2011

RECEIVED

WELL API NO. 30-025-01909
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: YORK ARQ
8. Well Number #001
9. OGRID Number 143199
10. Pool name or Wildcat TOWNSEND; PERMO UPPER PENN

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other TEMPORARILY ABANDONED
2. Name of Operator ENERVEST OPERATING, L.L.C. ATTN: JANET BIENSKI
3. Address of Operator 1001 FANNIN ST., SUITE 800, HOUSTON, TEXAS 77002
4. Well Location Unit Letter O : 660 feet from the SOUTH line and 1980 feet from the EAST line Section 12 Township 16S Range 34E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4,068' - GR
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input checked="" type="checkbox"/>
Pit type STEEL Depth to Groundwater Distance from nearest fresh water well * Distance from nearest surface water *
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material * NONE WITHIN 1,000'.

12. Check Appropriate  
NOTICE OF ACTION

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDONED ☐  
PULL OR ☐  
OTHER ☐  
CONDITIONS OF PA APPROVAL: Approved as to plugging of the well bore. Liability under bond is retained until surface restoration is completed.  
OCD Hobbs office needs C-103 "Check Off List for Surface Inspection".

Indicate Nature of Notice, Report, or Other Data

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: WELL PLUGGED AND ABANDONED 05/12/11. <input type="checkbox"/>	

13. I have completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or restoration.

05/07/11: TAG 5-1/2" CIBP @ 10,742'; PUMP A 25 SX. CMT. PLUG @ 10,742'-10,542' (CALC); CIRC. WELL W/ MUD; PUMP A 25 SX. CMT. PLUG @ 9,850'-9,650' (CALC); PUMP A 25 SX. CMT. PLUG @ 8,125'-7,925' (CALC).  
05/08/11: PUMP A 25 SX. CMT. PLUG @ 6,266'-6,066' (CALC); PUMP A 25 SX. CMT. PLUG @ 4,700'-4,500' (CALC).  
05/09-10/11: CUT X FULL 5-1/2" CSG. @ 3,614'; PUMP A 45 SX. CMT. PLUG @ 3,666'; WOC X TAG CMT. @ 3,515.  
05/11/11: PUMP A 45 SX. CMT. PLUG @ 3,025'; WOC X TAG @ 2,878'; PUMP A 40 SX. CMT. PLUG @ 1,805'; WOC X TAG @ 1,665'; PUMP A 40 SX. CMT. PLUG @ 467'; WOC X TAG CMT. PLUG @ 348'.  
05/12/11: MIX X CIRC. TO SURF. A 20 SX. CMT. PLUG @ 63'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD STEEL PLATE TO CASINGS X INSTALL DRY HOLE MARKER.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE David A. Eyler TITLE AGENT DATE 05/19/11

Type or print name DAVID A. EYLER

E-mail address: deyler@milagro-res.com

Telephone No. (432) 687-3033

For State Use Only

APPROVED BY [Signature] TITLE Staff Manager DATE 5-23-2011

Conditions of Approval, if any: