

DISTRICT I

OIL CONSERVATION DIVISION

1625 N FRENCH DRIVE, HOBBS, NM 88240

310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO. <b>300250746900</b>
5. Indicate Type of Lease FED <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input type="checkbox"/>	7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT
2. Name of Operator ALTURA ENERGY LTD	8. Well No. 311
3. Address of Operator 1017 W STANOLIND RD	9. Pool name or Wildcat HOBBS (G/SA)
4. Well Location Unit Letter <b>B</b> <b>330</b> Feet From The <b>NORTH</b> Line and <b>2310</b> Feet From The <b>EAST</b> Line Section <b>30</b> Township <b>18-S</b> RANGE <b>37-E</b> <b>38</b> NMPM LEA County	
10. Elevation (Show whether DFE, RKB, RTGR, etc.) 3658' GL.	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <b>MT TA</b> <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103

TEST DATE 04/02/99

PRESSURE READING 320 PSI

LENGTH OF PRESSURE READING 15 MIN

TEST WITNESSED NO

This Approval of Temporary  
Abandonment Expires 5-11-2004

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

SIGNATURE Robert M. Gilbert TITLE LIFT SPECIALIST DATE 04.06.99  
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY ODD TITLE ODD DATE 04.06.99

PRINTED IN U.S.A.

Pete Truck  
**TEJAS**  
INSTRUMENT ENGINEERS  
Unit 56

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BR-2221  
B 0-1000.8 42.94

NHUA 30-311

DAY

NIGHT