

DISTRICT 1

1625 N. French Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

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

WELL API NO. 30-025-29130
5. Indicate Type of Lease FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT
Section 24
8. Well No. 312
9. Pool name or Wildcat HOBBS (G/SA)

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Temporary Abandoned <input type="checkbox"/>	2. Name of Operator ALTURA ENERGY LTD.
3. Address of Operator 1017 W STANOLIND RD.	4. Well Location Unit Letter <u>B</u> <u>10</u> Feet From The <u>NORTH</u> Line and <u>2630</u> Feet From The <u>EAST</u> Line Section <u>24</u> Township <u>18-S</u> <u>37-E</u> NMPM <u>LEA</u> County
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3668' 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"/>	OTHER: <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <u>CASING PRESSURE TEST</u> <u>TA</u> <input checked="" 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: 05/08/00

Pressure Reading: Initial - 520 psi, 15 min - 520, 30 min - 520 psi.

Length of pressure test 30 minutes.

This Approval of Temporary
Abandonment Expires 6/27/2005

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

SIGNATURE Robert N. Gilbert TITLE LIFT SPECIALIST DATE 06/01/00
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____