State of New Mexico

Submit 3 Copies Form C-103 Energy, Minerals and Natural Resources Department to Appropriate Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St. 30-025-34906 **DISTRICT II** Santa Fe, NM 87505 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) North Hobbs G/SA Unit 1. Type of Well: OIL X GAS WELL OTHER 2. Name of Operator 8. Well No. Altura Energy L/ID 3. Address of Operator 9. Pool name or Wildcat P.O. Box 4294, Houston, TX 77210-4294 Hobbs: Grayburg - San Andres 4. Well Location North ____ Line and ___ __: ___1310 Feet From The ____ 598 Feet From The Line Section 18-S Township Range 38-E County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3643' GL 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data **NOTICE OF INTENTION TO:** SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB 1 OTHER: _ OTHER: Soud & Run Surface Casing 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. 4/15/00: MI x RU. Spud 12-1/4" hole at 6:00 a.m. (NMOCD notified) 4/17/00 -4/18/00: Rum 39 jts. 8-5/8", 24#, J-55, ST&C casing with 10 centralizers and set at 1570'. Cement with 475 sx. PBCZ (lead) and 225 sx. PBCZ tail. Plug down and circulate 45 sx. to pit. WOC. Cut off casing, weld on wellhead, and test to 500 psi. Clean out hard concrete from mud cross, choke manifold stinger, and rams. Nipple up BOP. Rebuild 2" fill up valve and 4" choke valves which had been cemented shut.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. Mark Stephens SIGNATURE _ TITLE Business Analyst (SG) _ DATE __ TYPE OR PRINT NAME Mark Stephens TELEPHONE NO. (This space for State Use) APPROVED BY_ TTTLE

CONDITIONS OF APPROVAL, IF ANY: