State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I	OIL CONSERVATION	ON DIVISION	Not Bell 1-1-09
P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATION DIVISION 2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-025-07625
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease
DISTRICT III			STATE Y FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
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:			7. Lease Name or Unit Agreement Name
OIL GAS WELL [SOUTH HOBBS (GB/SA) UNIT
2. Name of Operator ALTURA ENERGY, LTD.			8. Well No. 12
3. Address of Operator P.O. BOX 4294 HOUSTON,	TEXAS 79210-4294		9. Pool name or Wildcat HOBBS GB/SA
4. Well Location Unit Letter D: 330 Feet From The NORTH Line and 330		For Fr. WEST	
Section 5 19-S 38-E LEANIM			
10. Elevation (Show whether DF, RKB, RT, GR, etc.)			
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		
TEMPORARILY ABANDON	CHANGE PLANS	REMEDIAL WORK	☐ ALTERING CASING ☐
PULL OR ALTER CASING	CHANGE PLANS [_]	COMMENCE DRILLING	The state of the s
OTHER:		CASING TEST AND CEN	
	: (0)		
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.			
12/22/97 MOVE IN RU P&A EQUIPMENT.			
12/22/97 NUBOP RIH W/2-3/8" WS TAG CMT @ 3566". 12/22/97 CIRC HOLE W/120 BBLS MLF.			
12/22/97 SPOT 30 SXS CLASS "C" CMT FROM 3566-3341.			
12/22/97 SPOT 30 SXS CMT FROM 2608-2397.			
12/24/97 SPOT 30 SXS CMT FROM 1778-1578.			
12/24/97 SPOT 45 SXS CMT FROM 244-SURFACE.			
12/24/97 RD P&A EQUIPMENT.			
12/30/97 INSTALL DRY HOLE MARKER.			
I hereby codification to			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE 1 1 WOON 1 WA		P&A SUPERVISO	DR DATE 12/24/97
TYPE OR PRINT NAME MILTON NEATH	EKLIN		TELEPHONE NO.
(This space for State Use)			
APPROVED BY DATE 7-18-00			
CONDITIONS OF APPROVAL OF ANY:			
IC HWW			

40