State of New Mexico Form C-103 Submit 3 Copies Energy, Minerals and Natural Resources Depart Revised 1-1-89 to Appropriate District Office OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-35068 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, Nid 88210 STATE FEE L 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 V-4396-2SUNDRY 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.) Type of Well: ENRON "9" STATE COM WELL K OTHER WELL 8. Well No. 2. Name of Operator MURCHISON OIL & GAS, INC. 9. Pool name or Wildcat 1445 ROSS AVE., STE. 5300, LB 152 JOHNSON RANCH WOLFCAMP DALLAS, TX. 75202-2883 4. Well Location : 1650 Feet From The NORTH 2550 Feet From The WEST Line and ___ LEA County 24S 33E **NMPM** Township Range Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3584 GL Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT TEMPORARILY ABANDON **CHANGE PLANS** CASING TEST AND CEMENT JOB X **PULL OR ALTER CASING** 1ST INTERMEDIATE PIPE OTHER: 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. Drilled 12-1/4" hole to 5138'. Ran 57 joints of 9-5/8" 47 #/FT N-80 LT&C, 3 joints of 9-5/8" 53.3 #/FT N-80 LT&C and 69 joints of 9-5/8 53.3 #/FT P-110 LT&C casing to 5138'. Cemented with 1245 SXS 50:50 POZ Class "C" + 5% D44 + 10% D20 + .25 #/SX D29 + 2% D46 followed by 200 SX Class "C" + 1% S1. Plug down @ 4:45 AM 8/25/00 circulated 240 SXS to reserve pit. WOC 18 HRS. Test BOP's to 1500 PSI. Drill out shoe and resume drilling in 8-1/2" hole.

ste/to the best of my knowledge and belief. 9/19/00 W.P. OPERATIONS SIGNATURE MICHAEL S. DAUGHERTY TYPE OR PRINT HAND (This space for State Use) ORIGINAL SKONED DE CROPE VELLEAM.

DISTRICT I SUPERVISOR

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: