

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
RECEIVED
AUG 07 2013
OIL CONSERVATION DIVISION
NMOC D ARTESIA
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

| | | |
|---|--|---|
| 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.) | | WELL API NO. 30-015-23036 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator Guardian Operating Corp. | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 6824 Island Cir., Midland, TX 79707 | | 7. Lease Name or Unit Agreement Name Ann Com |
| 4. Well Location Unit Letter <u>G</u> : 1655 feet from the <u>N</u> line and <u>1980</u> feet from the <u>E</u> line Section <u>15</u> Township <u>24S</u> Range <u>28E</u> NMPM <u>EDDY</u> County | | 8. Well Number <u>1</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3022' G.L. | | 9. OGRID Number 287300 |
| | | 10. Pool name or Wildcat Culebra Bluff; Wolfcamp, South (Gas) |

www.emnrd.state.nm.us
Current forms are available on our website and should be used when filing regulatory documents.

Box to Indicate Nature of Notice, Report or Other Data

| | | | | |
|-------------------------|---------------------------------|---|--|--|
| PE TEN PUL DOM | <input type="checkbox"/> SINGLE | <input type="checkbox"/> MULTIPLE COMPL | <input type="checkbox"/> BANDON <input type="checkbox"/> INS <input type="checkbox"/> OTHER: | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> P AND A <input type="checkbox"/> OTHER: <input type="checkbox"/> |
|-------------------------|---------------------------------|---|--|--|

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/07/2013: Chip off old cmt, sand blast old wellhead.

4/15/2013: Welder cut off P&A marker. Clean out stub and prep for new wellhead.

5/02/2013: AFS install new 13 5/8" x 11", 5K csg spool w/ gate valves. Build in new cellar.

5/09-29/2013: RU Standard workover unit and Basic reverse unit. Drilled out plugs and CIBP to TD of 11,127'. Secure wellhead and RD.

7/01-07/2013: RU pulling unit. RIH with 5" pkr and set at 9700'. Test 5" liner to 7500#. Held good. RU Jarrel wireline and perforate Wolfcamp interval 10,493-731' OA. Swab 31 BLW. RD.

7/24-25/2013: RU Pacesetter and acidize Wolfcamp with 5000 gal 15% HCL w/ 100 ball sealers. AIR 8 BPM @ 6100#. Ball out to 7500#. Flow and swab 135 BLW. Well kicked off and flowed. Potentialled 7/25/13 on 20/64" choke, 200 # FTP, 600 MCFD + 1 BC in 4hrs. SI WOPL.

7/27/2013: SITP 4200#.

Spud Date:

Rig Release Date:

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

SIGNATURE [Signature] TITLE President DATE 7/28/2013

Type or print name Randall Cate E-mail address: Guardian_op@yahoo.com PHONE: 432-553-1849

For State Use Only

APPROVED BY: [Signature] TITLE Dist. Rep Supervisor DATE 8/7/2013
Conditions of Approval (if any):