Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
District 1 Energy, Minerals and Natural Resource	s May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-015-28938 5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE STATE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	VA-696-0000
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)	SPIKE
1. Type of Well: Oil Well Gas Well Other	8. Well Number 1
2. Name of Operator	9. OGRID Number 024010
V-F PETROLEUM INC.	
3. Address of Operator	10. Pool name or Wildcat
P.O. BOX 1889, MIDLAND, TEXAS 79702	73960 Carlsbad: Morrow, South (Gas)
4. Well Location	
Unit Letter H: 1,980' feet from the NORTH line and 660 feet	from the <u>EAST</u> line
Section 33 Township 23-S Range 26-E	NMPM EDDY County
11. Elevation (Show whether DR, RKB, RT, G	R, etc.)
3,340' GR	
Pit or Below-grade Tank Application or Closure	
Pit typeNONEDepth to GroundwaterDistance from nearest fresh water well_	Distance from nearest surface water
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls;	Construction Material
12. 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 ☐	
-	DRILLING OPNS: P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEN	
· -	FURN WELL TO PRODUCTION
13. Describe proposed or completed operations. (Clearly state all pertinent details, and	
starting any proposed work). SEE RULE 1103. For Multiple Completions: Attac	
recompletion.	
(SEE BACK)	
	RECEIVED
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www.emnra.state.nm.us	AUG 2 6 2013
Current forms are available on our	
website and should be used when	NMOCD ARTES:A
filing regulatory documents.	And the second s
ming regulatory documents.	
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I hereby certify that the information above is true and complete to the best of my knowledge	and belief. I further certify that any pit or below-
grade tank has been/will be constructed or closed according to NMOCD guidelines	
OCD-approved plan $\prod_{j'}$.	
SIGNATURE Sandy Lawle TITLE VICE PRESIDEN	NT DATE <u>08/23/13</u>
Type or print name SANDY LAWLIS E-mail address: skl@vfpetroleur	
(This space for State use)	
- KINVINO I) SHOW	DL1687 8/2/2002
APPPROVED BY / VOUCE TITLE DISTORTED	CW/SO (DATE OF 1/20/3
•	/ /

Conditions of approval, if any: