

Submit 1 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-05132
5. Indicate Type of Lease FEDERAL NMLC-029418B
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LEA C FEDERAL
8. Well Number 004
9. OGRID Number 289372
10. Pool name or Wildcat GRAYBURG JACKSON;SR-Q-G-SA

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: Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
CAPSTONE NATURAL RESOURCES, LLC

3. Address of Operator
2250 E. 73RD ST., SUITE 500, TULSA, OK 74136

4. Well Location

Unit Letter J : 1980 feet from the SOUTH line and 1980' feet from the EAST line

Section 11 Township 17S Range 31E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3954' DF

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: **CONVERT TO INJECTOION** ☒

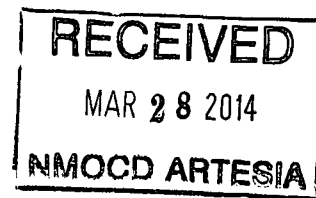
13. Describe proposed or completed operations. (Clearly state all pertinent details; and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.714 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Reinstatement of authorization to inject for waterflood operations authorized by
NMOCD Order No. R-4697-B

Commence Injection:

Commenced injection March 26, 2014 at a rate of 400 BWPD at 100 psi.

This information is also being submitted to the BLM on Sundry Form 3160-5.



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

SIGNATURE Debbie McKelvey TITLE AGENT DATE 3/27/14

Type or print name: Debbie McKelvey E-mail address: debmcKelvey@earthlin.net Telephone No. 505-392-3575

For State Use Only

APPROVED BY: R. Wade TITLE Dist. H. Supervisor DATE 3/31/2014

Conditions of Approval (if any):