

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

Form C-103
Revised July 18, 2013

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

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. 30-015-42394
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Memorial Production Operating, LLC		6. State Oil & Gas Lease No.
3. Address of Operator c/o Brammer Engineering, Inc 400 Texas St, Ste 600 Shreveport, LA 71101		7. Lease Name or Unit Agreement Name Kelly
4. Well Location Unit Letter <u>N</u> <u>330</u> feet from the <u>South</u> line and <u>1652</u> feet from the <u>West</u> line Section <u>27</u> Township <u>18S</u> Range <u>26E</u> NMPM Eddy County		8. Well Number <u>8</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3360 GR		9. OGRID Number 303900
		10. Pool name or Wildcat

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

NOTICE OF INTENTION TO:

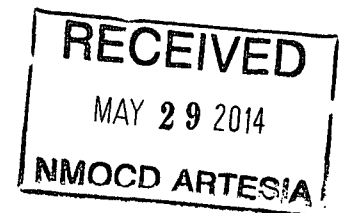
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☒
OTHER: ☐

SUBSEQUENT REPORT OF:

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

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.

Will plan to use closed-loop system, instead of a lined pit as originally submitted on APD.



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 Adonya Dryden TITLE Co-Administrator, Regulatory Dept DATE 5/29/2014

Type or print name Adonya Dryden E-mail address: adonya.dryden@brammer.com PHONE: 318-429-2277

For State Use Only

APPROVED BY: T. C. Shepard TITLE Geologist DATE 5-29-2014

Conditions of Approval (if any):