

Office
District I - (575) 393-6161 NM OIL CONSERVATION
1625 N. French Dr., Hobbs, NM 88240 ARTESIA DISTRICT
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210 OCT 06 2016 CONSERVATION DIVISION
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
RECEIVED
1220 South St. Francis Dr.
Santa Fe, NM 87505

REVISED July 10, 2013

WELL API NO. 30-015-02308
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name CAROLINE
8. Well Number 005
9. OGRID Number 297512
10. Pool name or Wildcat SEVEN RIVERS
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

MEM OIL LLC

3. Address of Operator

1902 HERMOSA DR. 88210

4. Well Location

Unit Letter

feet from the

line and

feet from the

line

Section

D-28

Township

A-5

Range

28E

NMPM

County

EDDY

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

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.

REPLACED (W) LEGIBLE WELL SIGN

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

Steve Mahaxi

TITLE

SECRETARY

DATE

9/29/16

Type or print name
For State Use Only

STEVE MAHAXI

E-mail address:

S.MAHAXI536@YAHOO.COM

PHONE:

575-106-0036

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):