Submit 1 Copy 10 Appropriate District Office		State of New Mexico			Form C-103	
	Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			Revised July 18, 2013 WELL API NO.	
	Artesia, NM 88210	OIL CONSERVATION DIVISION			30-015-44283 5. Indicate Type of	- Lease
A-71100-1000-0000-0000-0000-0000-0000-00	Strict III – (505) 334-6178 1220 South St. Francis Dr.				STATE	FEE X
District IV - (50	District IV – (505) 476-3460 Santa Fe, NM 87505					Lease No.
87505					318103	
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.)					7. Lease Name or Unit Agreement Name McCord Enterprises 23 WCA	
1. Type of Well: Oil Well X Gas Well Other					8. Well Number 004H	
2. Name of Operator CHISHOLM ENERGY OPERATING, LLC					9. OGRID Number 372137	
 Address of Operator 801 Cherry Street, Suite 1200-Unit 20 – Fort Worth, Texas 76102 					10. Pool name or Purple Sage; Wolfcamp (GAS)	
4. Well Location						
Unit Letter_N : 125 feet from the S line and 1510 feet from the W line						
Section 23 Township 23S Range 26E NMPM County Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
3268 GR						
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 TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A						
PULL OR ALTER CASINGMULTIPLE COMPL CASING/CEMENT JOB						
CLOSED-LOOP SYSTEM						
 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. 						
This is to correct Item 18 Formation: from Strawn to Wolfcamp					NM OIL CONSERVATION ARTESIA DISTRICT	
					AU	G 0 1 2017
					R	ECEIVED
Γ	1/5/2018					
Spud Date:			Rig Release Da	ite:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
A start						
SIGNATURE Bettie Walson TITLE Regulatory ManagerDATE07/31/2017						
Type or print nameBettie Watson E-mail address: _bwatson@chisholmenergy.com PHONE: _817-864-1104						
For State Use Only						
APPROVED E	X aymon	of IN Surda	My LETE 9	redosi? T	DAT	е <u> 8-1-17</u>
APPROVED BY: Saymond W Scalary THE Greelog-27 DATE 8-1-17 Conditions of Approval (If any):						