

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

WELL API NO 30-015-02749	
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 HIGH LONESOME QUEEN UNIT	
8 Well Number #006	
9 OGRID Number 371484	
10 Pool name or Wildcat HIGH LONESOME, QUEEN	
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2 Name of Operator Rover Operating, LLC	
3 Address of Operator 17304 Preston Road, Suite 300, Dallas, TX 75252	
4 Well Location Unit Letter I 1980 feet from the South line and 660 feet from the East line Section 16 Township 16S Range 29E NMPM County Eddy	
11 Elevation (Show whether DR, RKB, RT, GR, etc ) 3683 GR	

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

NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER <input type="checkbox"/>		OTHER RETURNED TO PRODUCTION <input checked="" type="checkbox"/>	

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

3/29/18  
Make repairs to surface unit  
Load tbq, good PA, return to production

Spud Date

9/10/1955

Rig Release Date

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

SIGNATURE

Kent Preston

TITLE

Regulatory Contractor

DATE 4/18/2018

Type or print name

Kenneth Preston

E-mail address

kpreston@roverpetro.com

PHONE

214-234-9115

For State Use Only

APPROVED BY

[Signature]

TITLE

Staff

DATE

4-23-18

Conditions of Approval (if any)