Submit 1 Copy To Appropriate District Office District 1 – (575) 393-6161 RECEIVED State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Rayland July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283	WELL API NO. 30-015-43743
811 S. First St., Artesia, NM 88210 WAY 3 DUUGONSERVATION DIVISION	5. Indicate Type of Lease
1220 South St. Tuniol Dt.	STATE FEE X
District IV – (505) 476-3460 DISTRICT II-ARTESIA OSAID ta Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	Williams Fee 2524 LBC
PROPOSALS.)	8. Well Number 1H
1. Type of Well: Oil Well X Gas Well Other 2. Name of Operator	9. OGRID Number
Kaiser-Francis Oil Company	12361
3. Address of Operator	10. Pool name or Wildcat
P. O. Box 21468, Tulsa, OK 74121-1468	Loving, East (Brushy Canyon)
4. Well Location	2205 6 (6) 1 11-25 15
Unit Letter F : 2290 feet from the North line and Section 25 Township 23S Range 28F.	
Section 25 Township 23S Range 28E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Eddy County
2996 GR	,
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO TEMPORARILY ABANDON CHANGE PLANS COMMENCE DE	RK ☐ ALTERING CASING ☐ ☐ RILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEI	
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM OTHER: OTHER:	to security
OTHER: OT	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Coproposed completion or recompletion.	ompletions: Attach wellbore diagram of
1/22/18 Ran 13 3/8", 54.5# J-55 set @ 378'. Cmt'd with	380 sxs. TOC @ surf.
1/26/18 Ran 9 5/8", 40# P-110 set @ 2755'. Cmt'd with	765 sxs. TOC @ surf.
1/31/18 Ran 7", 20# P-110 set @ 6530'. Cmt'd with 448	
TOC @ 66101	
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$\kappa \omega \rho c$	On such
	0
Spud Date: 1/20/18 Rig Release Date: 2/11/	18
I hereby certify that the information above is true and complete to the best of my knowled	ge and belief.
SIGNATURE Ser Celler GuyTITLE Mgr., Regulatory Compliance DATE 5-29-18	
Type or print nameCharlotte Van Valkenburg E-mail address: Charlotv@kfoc.net PHONE: 918-491-4314	
For State Use Only	
APPROVED BY: 12 12 12 13 TITLE STATE TO 18	

APPROVED BY: Conditions of Approval (if any):