

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.	30-015-24097
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Smith 10 Com
8. Well Number	1
9. OGRID Number	372098
10. Pool name or Wildcat	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3728	

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
MOP LLC

3. Address of Operator
5555 San Felipe St. Houston, TX 77506

4. Well Location
 Unit Letter G : 2310 feet from the N line and 1980 feet from the E line
 Section 10 Township 245 Range 27E NMPM County EDDY

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

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

- 4 1/2 CIBP @ 10,600' w/45 sx of cement to 10,245 tag
- 30 sx @ 7200-7100' - 25' sx @ 7600'
- 40 sx @ 2180'-2080' P.S. & tag - 25' sx @ 4450'
- 40 sx @ 600'-500' P.S. & tag - Part @ 2200'
- 35 sx @ 100'-surf verify P.S.
 - Install D.H.M.

Notify OCD 24 hrs. prior to any work done.

RECEIVED
 APR 19 2019
 DISTRICT II-ARTESIA O.C.D.

Spud Date: Rig Release Date:

P&A mud between all plugs. Close loop all fluids to licensed facility.
 *See Attached COAs Must be Plugged by 4/25/20
 I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Brody Pinkerton* TITLE: AGENT DATE: 4/18/19

Type or print name: BRODY PINKERTON E-mail address: Brody@Maverickwellpluggers.com PHONE: 432-458-3780
For State Use Only

APPROVED BY: *Staff* TITLE Staff DATE 4/25/19
 Conditions of Approval (if any):