

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-005-64334
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Tamaroa Operating, LLC		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 866937, Plano Tx, 75086-6937		7. Lease Name or Unit Agreement Name Hellcat
4. Well Location Unit Letter H : 2310 feet from the N line and 990 feet from the E line Section 25 Township 8S Range 28E NMPM Chaves County		8. Well Number 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3938 GR		9. OGRID Number 328666
		10. Pool name or Wildcat Twin Lake; San Andres

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: Well Complete <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date

9/19/19: Acidize Toe w/ 2500 gals NEFE acid

10/1 to 10/6/19: Frack well, 18 stages from 2900' to 7135'. 1,924,014 lbs sand and 41,080 FW gel

10/9 to 10/16/19: Drill out stage plugs and flow well

10/22 to 10/23/19: Run PC pump and 2 7/8" tubing to 2674'. Run rods and Rotor and start pumping load.

RECEIVED

Spud Date:

June 13, 2019

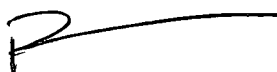
Rig Release Date:

July 16, 2019

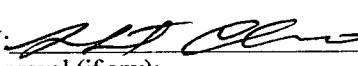
NOV 12 2019

DISTRICT IV-ARTESIA O.C.D.

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

SIGNATURE  TITLE Consultant DATE November 12, 2019

Type or print name Phelps White E-mail address: pwiv@zianet.com PHONE: 575 626 7660  
**For State Use Only**

APPROVED BY:  TITLE Staff DATE 11/14/19  
Conditions of Approval (if any):