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Submit One Copy To Appropriate District

Office

District I

1625 N. French Dr.

District II

811 S. First St., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103

Revised November 3, 2011

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-015-44600

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Cottonwood Fee SWD #1

8. Well Number #1 (SWD-1736)

9. OGRID Number

372603

10. Pool name or Wildcat

SWD; Devonian-Silurian

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 Saltwater Disposal Well

2. Name of Operator

3Bear Field Services LLC

3. Address of Operator

1512 Larimer St., Ste. 540, Denver, CO 80202

4. Well Location

Unit Letter O : 330 feet from the SOUTH line and 1662 feet from the EAST lineSection 19 Township 26S Range 26E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3,483 (GR)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐OTHER: ☐

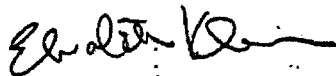
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐☒

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

We rigged up on the well and were going to start pulling the injection string (suspecting a tubing leak) but did not see any over pull from the Packer. We then re-latched the injection string into the Packer and pressured up to test the pkr/tubing integrity and it held. Then notified the state of the MIT test.

SIGNATURE

TITLE Director, EHS Regulatory Compliance DATE 11/20/19

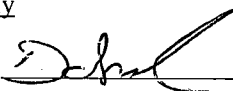
TYPE OR PRINT NAME

Elisabeth Klein

E-MAIL: lklein@3bearllc.comPHONE: 303-882-4404

For State Use Only

APPROVED BY:

TITLE Compliance Office DATE 12-17-19