

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Artesia, 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
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-35029
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 Renata 16 State Com
8. Well Number 1
9. OGRID Number 243452
10. Pool name or Wildcat Chester

11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4065'	
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Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type	Depth to Groundwater
Distance from nearest fresh water well	
Distance from nearest surface water	
Pit Liner Thickness:	mil
Below-Grade Tank:	Volume
bbls; Construction Material	

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
Corkran Energy, LP

3. Address of Operator
300 Beardsley Lane, C-204 Austin, TX 78746

4. Well Location
Unit Letter A : 660 feet from the North line and 910 feet from the East line
Section 16 Township 23S Range 24E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4065'

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	P AND A <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>
MULTIPLE COMPL <input type="checkbox"/>	OTHER: <input checked="" type="checkbox"/>
OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

8/29/07 TD well at 10875'.

8/30/07 Run 54 jts 4-1/2", 11.6#, L-80, LT&C liner, set at 10874' w/ top of liner at 8607'.

8/31/07 Test lines to 5000 psi. Cement liner: Single slurry 370 sx 50/50 Poz Class H cement + 2% bwoc Bentonite + 3% bwoc Sodium Chloride + 5 lbs/sk LCM-1 + 0.6% bwoc FL-25 + 0.6% bwoc FL-52A (wt 14.2 ppg, yield 1.30 ft3/sk, slurry 86 bbl). Displace w/ 34 bbl H2O + 61 bbl mud.

Bump plug w/ 2500 psi, floats held okay. Set packer, pull 10 stds, circulate bottoms up. Did not circulate cement to surface. Install cap on tubing head.

9/1/07 Release rig.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Angela Lightner TITLE Consultant DATE 9-21-2007

Type or print name Angela Lightner E-mail address: angela@rkford.com Telephone No. 432-682-0440

For State Use Only

APPROVED BY: Accepted for record - NMOCD TITLE _____ DATE 9/26/07

Conditions of Approval (if any):