| Office Submit I Copy To Appropriate District  | State of New Mexico               |                    |                                   | Form C-103            |  |
|---|-----------------------------------|--------------------|-----------------------------------|-----------------------|--|
| <u>District I</u> – (575) 393-6161  | Energy, Minerals and Nati         | iral Resources     |                                   | Revised July 18, 2013 |  |
| 1625 N. French Dr., Hobbs, NM 88240   |                                   |                    | WELL API NO.                      |                       |  |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210                                      | OIL CONSERVATION DIVISION         |                    |                                   | 30-021-20633          |  |
| District III – (505) 334-6178   | 5. 1 nst 5t., 14testa, 14vi 65216 |                    | 5. Indicate Type of Lease         |                       |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410  | Rio Brazos Rd., Aztec, NM 87410   |                    | STATE FEE                         |                       |  |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM                                    | Santa Fe, INIVI o                 | 7303               | 6. State Oil & Gas Leas           | e No.                 |  |
| 87505   |                                   |                    |                                   |                       |  |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A |                                   |                    | 7. Lease Name or Unit             | Agreement Name        |  |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH   |                                   |                    | LEWIS 2028                        |                       |  |
| PROPOSALS.)  1. Type of Well: Oil Well  |                                   |                    | 8. Well Number 34                 | 1                     |  |
| 2. Name of Operator   |                                   |                    | 9. OGRID Number 2:                | 5078                  |  |
| WHITING OIL AND GAS CORPORATION   |                                   |                    |                                   |                       |  |
| 3. Address of Operator  |                                   |                    | 10. Pool name or Wildcat          |                       |  |
| 400 W ILLINOIS STE 1300 MIDLAND, TX 79701   |                                   |                    | BRAVO DOME CARBON DIOXIDE GAS 640 |                       |  |
| 4. Well Location  |                                   |                    |                                   |                       |  |
| Unit Letter G 1859 feet from t  | he NORTH line and 1749 fe         | et from the EAST   | line                              |                       |  |
| Section 34 Township   | 20N Range 28E                     | NMPM               | County HARDIN                     | G .                   |  |
|   | Elevation (Show whether DR        |                    |                                   |                       |  |
|   | 42' GR                            | ,,,,,              |                                   |                       |  |
| handa garani and handa garani and sa  |                                   |                    | P. (1993)                         |                       |  |
| 12. Check Appro   | opriate Box to Indicate N         | Jature of Notice   | Report or Other Data              |                       |  |
| 12, 0.000, 1.155.   | spriate Borr to marcure r         |                    | , report of other but             |                       |  |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:   |                                   |                    |                                   | T OF:                 |  |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASI  |                                   |                    |                                   | RING CASING 🔲         |  |
| TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILL   |                                   |                    | RILLING OPNS. 🗌 🏻 P AN            | DA 🗆                  |  |
| PULL OR ALTER CASING 🔲 MU   | ILTIPLE COMPL                     | CASING/CEMEN       | NT JOB <b>∑</b>                   |                       |  |
| DOWNHOLE COMMINGLE  |                                   |                    |                                   |                       |  |
| CLOSED-LOOP SYSTEM  | <u></u>                           |                    |                                   |                       |  |
| OTHER:  |                                   | OTHER:             | <del></del>                       |                       |  |
| 13. Describe proposed or completed  |                                   |                    |                                   |                       |  |
| of starting any proposed work).  proposed completion or recompletion  |                                   | C. For Multiple Co | impletions: Attach wellboi        | e diagram of          |  |
| proposed completion of recomple   | etton.                            |                    |                                   | ,                     |  |
|   |                                   |                    |                                   | ,                     |  |
| 07/06/2014 SPUDDED WELL   |                                   |                    |                                   | :                     |  |
| 07/07/2014 RAN 9 5/8" J-55 36# CSG S  | ET @ 721' W/450 SXS CM            | r, 14.80 PPG, 1.35 | YIELD, CIRCULATED TO              | ) SURF                |  |
| 07/11/2014 RAN 5 ½" J-55 15.5# CSG S  |                                   |                    | YEILD + 275 SXS CMT 1             | 3.20 PPG              |  |
| 1.86 YIELD TOTAL 625 SX   | KS CMT, CIRCULATED TO             |                    | A & 1                             |                       |  |
|   |                                   | <b>A</b>           | CONS. DIV DIST. 3                 |                       |  |
| + Report surface casing pressi  | use test on next su               | ndox               | JUL 16 2014                       |                       |  |
| f Report Surface casing pressi  |                                   |                    | JUL 10 2014                       |                       |  |
|   |                                   |                    |                                   |                       |  |
| Sand Date: 07/06/2014   | Rig Release D                     | 07/11/2014         |                                   |                       |  |
| Spud Date: 07/00/2014   | Kig Kelease D                     | ate.               |                                   |                       |  |
| Ours Trans  |                                   | c. 3 c C           |                                   | 010-1101-             |  |
| Quend Form to in  |                                   |                    |                                   | 1 Srygnither          |  |
| I hereby certify that the information above   | s is true and complete to the b   | est of my knowled  |                                   |                       |  |
| $\sim 1/2$  |                                   |                    | Inclu                             | 76 LD 9               |  |
| SIGNATURE YOUR MADE   | TITLE: REG                        | ULATORY ANAL       | YST DATE: 07/14/2014              | date reached          |  |
| t V   | <del></del>                       |                    |                                   |                       |  |
| Type or print name Kay Maddox E-mail  | l address: <u>kay.Maddox@Whit</u> | ing.com PHONE      | 432-638-8475                      | 95. Ç                 |  |
| For State Use Only  |                                   |                    | <b>1</b>                          | •                     |  |
| 01011   | <pre>Deput</pre>                  | y Oil & Gas Ir     | ispector,                         | -/ /u/                |  |
| APPROVED BY: 0201 SCALL   | TITLE                             | District #3        | DATE                              | 7/25/14               |  |
| Conditions of Approval (if any):  | PV                                |                    |                                   | •                     |  |
|   |                                   |                    |                                   |                       |  |