Submit 1 Copy To Appropriate District Office	State of New Me			Form C-103
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.	
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-021-20679	
<u>District III</u> - (505) 334-6178	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease	
1220 S. St. Francis Dr., Santa Fe, NM				
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit A	greement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			DECATUR 1927 24	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			8. Well Number 001	
I. Type of Well: Oil Well Gas Well X Other				
2. Name of Operator			9. OGRID Number 25078	
WHITING OIL AND GAS CORPORATION			·	
3. Address of Operator			10. Pool name or Wildcat	
400 W ILLINOIS STE 1300 MIDLAND, TX 79701			WILDCAT: TUBB CO2 GAS POOL	
4. Well Location				
Unit Letter G 1692 feet fro	om the NORTH line and 2317 fe	eet from the EAST	line	
Section 24 Township 19N Range 27E NMPM County HARDING				
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5511' GR				
12 Check Ar	unanista Davi ta Indiasta N	atura af Nation	Derrort en Othen Dete	
-	propriate Box to Indicate N		•	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORI   TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				
		ON CITYON CEMIEN		
CLOSED-LOOP SYSTEM				
OTHER:		OTHER:		
13. Describe proposed or complet	ad operations (Clearly state all t		nd give nortinent dates inclu	ding actimated data
	:). SEE RULE 19.15.7.14 NMAC			
proposed completion or recon				ungruin or
		ţ	All 80.	<b>G</b> . <b>10 1</b>
11/24/2014 SPUDDED WELL			UIL CON	S. DIV DIST. 3
			DEC	022014
Saud Data 11/24/2014	n'n i n			
Spud Date: 11/24/2014	Rig Release Da	ite:		
		<u></u>	<u></u>	
I hereby certify that the information ab	ove is true and complete to the be	est of my knowled	ge and belief.	· .
2.101				
SIGNATURE YAM MA	ddo/	JLATORY ANAL	LYST DATE: 11/25/2014	:
Type or print name Kay Maddox E-mail address: <u>kay.Maddox@Whiting.com</u> PHONE: 432-638-8475				
For State Use Only	DEPUTY	Y DIL & GAS	S INSPECTOR	
APPROVED BY: Deale	TITLE	DISTRICT		2/4/14
Conditions of Approval (if any):	PV		·····	
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