

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

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

WELL API NO. <b>30-039-31315</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>NMSF 078771</b>
7. Lease Name or Unit Agreement Name <b>NMNM 78407E</b>  <b>Rosa Unit</b>
8. Well Number <b>#642H</b>
9. OGRID Number <b>120782</b>
10. Pool name or Wildcat <b>Basin Mancos</b>

**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  
**WPX Energy Production, LLC**

3. Address of Operator  
**P. O. Box 640, Aztec, NM 87410 (505) 333-1808**

4. Well Location  
Unit Letter **C** : **975'** feet from the **FNL** line and **524'** feet from the **FWL** line  
Section **19** Township **31N** Range **5W** NMPM County **Rio Arriba**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**6305' GR**

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"/>			
OTHER: <input type="checkbox"/>		OTHER: <b>INTER-WELL COMMUNICATION</b> <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**WPX Energy conducted stimulation on the following well:**

**Start date:** 3/23/16  
**End date:** 3/26/16  
**Type:** Fracture Treatment  
**Pressure:** 7427psi  
**Volume Average:** Nitrogen - N/A (scf); Sand - 359,085 (lbs); Fluid - 330,324 (gals)  
**Results of any investigation conducted:** N/A

**Attached: Spreadsheet with affected well due to stimulation activity.**

OIL CONS. DIV DIST. 3  
APR 06 2016

Spud Date:

Rig Release Date:

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

SIGNATURE Marie E. Jaramillo TITLE Permit Tech DATE 4/5/16

Type or print name Marie E. Jaramillo E-mail address: marie.jaramillo@wpxenergy.com PHONE: (505) 333-1808 For State Use Only

APPROVED BY **ACCEPTED FOR RECORD** TITLE DATE

Conditions of Approval (if any):

Affected Wells										
Well Name	API number	Formation	Operator	Date Affected	Type Communication	Volume of Communication	Highest PSI Observed	Standard Operating PSI	Results of Communication	Results of any Investigation Conducted
Rosa Unit 641H	30-039-31314	Basin Mancos	WPX	3/23/2016	Decrease PSI	N/A	0	1265	Shut In	No Gas Anaylsis/Well was not shut in due to no Nitrogen/No Harm was done
Rosa Unit 643H	30-039-31317	Basin Mancos	WPX	3/23/2016	Decrease PSI	N/A	0	1280	Shut In	No Gas Anaylsis/Well was not shut in due to no Nitrogen/No Harm was done
<b>Stimulated Well:</b>		<b>Rosa Unit 642H</b>								

Stimulated Well: Rosa Unit 642H