

Submit 3 Copies To Appropriate District  
Office  
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 Rs., 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

Form C-103

Revised July 18, 2013

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

WELL API NO. <b>30-045-24649</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>FEE</b>
7. Lease Name or Unit Agreement Name <b>GARCIA GAS COM B</b>
8. Well Number <b>1E</b>
9. OGRID Number <b>372171</b>
10. Pool name or Wildcat <b>MV - BLANCO::MESAVERDE</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: <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator <b>Hilcorp Energy Company</b>	
3. Address of Operator <b>382 Road 3100 Aztec, NM 87410</b>	<b>NMOC</b> <b>FEB 14 2019</b> <b>DISTRICT III</b>
4. Well Location Unit Letter <b>M</b> Footage <b>790' FSL &amp; 590' FWL</b> Section <b>21</b> Township <b>029N</b> Range <b>010W</b> <b>SAN JUAN COUNTY</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>5471' GR</b>	

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input checked="" type="checkbox"/> - Redelivery	

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.

This well was re-delivered on 1/31/2019 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS RECOMPLETED IN THE MESAVERDE AND COMMINGLED WITH THE EXISTING DAKOTA.

TP: 725 CP: 790 Initial MCF: 204

Meter No.: 94164

Gas Co.: HEC

Proj Type.: RECOMPLETE

Spud Date: 1/25/1981

Rig Released Date:

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

SIGNATURE *Christine Brock*

TITLE Operations/Regulatory Tech - Sr. DATE 2/12/2019

Type or print name Christine Brock

E-mail address: cbrock@hilcorp.com

PHONE: 505.324.5155

APPROVED BY: **ACCEPTED FOR RECORD**

TITLE

DATE

Conditions of Approval (if any):

*AY*