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

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.

30-045-25695

5. Indicate Type of Lease

STATE FEE X

6. State Oil & Gas Lease No.

87505	·				6. State Oil & Gas L	ease No.	
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.) The composition of the c							
1. Type of Well: Oil Well X Gas Well Other					8. Well Number 1E		
Name of Operator Hilcorp Energy Co Address of Operator 382 Road 3100 Az	or				9. OGRID Number 372171 10. Pool name or W MV - BLANCO:		
4. Well Location							
Unit Letter	J	Footage	1620' FSL & 1555' FE	EL			
Section	35	Township	032N Rang	e 012W 5	SAN JUAN COUNTY		
			on (Show whether DR, F	RKB, RT, GR, etc.)	7		
	12. CHECK	APPROPRIA	ATE BOX(ES) TO INDIC	CATE NATURE OF NOTICE	CE, REPORT OR OTHE	R DATA	
NOTICE OF INTENTION TO:					SUBSEQUENT REPORT OF:		
PERFORM REMEDIA TEMPORARILY ABAI PULL OR ALTER CA: DOWNHOLE COMMI CLOSED-LOOP SYS' OTHER:	NDON SING NGLE	CHANG	ND ABANDON [E PLANS [LE COMPL [REMEDIAL WORK COMMENCE DRIIL CASING/CEMENT OTHER: X	LLING OPNS.	ALTERING CASING P AND A	
of starting any proposed comp	proposed work letion or recon). SEE RUL npletion.	E 19.15.7.14 NMAC.	ertinent details, and givertinent details, and giver For Multiple Completion and entrained hydrocarb	ons: Attach wellbore		
Notes: WELL WA	S RECOMPLET	TED TO THE	MESAVERDE AND DO	WNHOLE COMMINGLED	WITH EXISTING DAK	OTA.	
TP: 143	CI	P: 216	Initial MCF: 70			NMOCD	
Meter No.	: 3957130			Gas Co.: HAR		JUN 2 1 2019	
Proj Type. Spud Date	: RECOMPLE : 10/17/19		Rig Released D	ate:	D	ISTRICT III	
I hereby certify that the	information abo	ve is true and	complete to the best of	my knowledge and belief	/Regulatory Tech - S	r. DATE 6/21/2019	
Type or print name	Mandi Walk	er	E-mail address:	mwalker@hilcorp.co	om	PHONE: 505.324.5122	
APPROVED BY:	ACCEPT	ED FOR R	ECORD	TITLE		DATE	
Conditions of Approval (if any):				PV			