

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 Rd., Aztec, NM 87410

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM 87505

87505

HOBBS OCD

NOV 20 2013

RECEIVED

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Revised July 18, 2013

WELL API NO.

30 025 31888

5. Indicate Type of Lease

STATE ☒FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Red Hawk 32

8. Well Number

1

9. OGRID Number

246368

10. Pool name or Wildcat

Delaware

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 SWD

2. Name of Operator

BASIC ENERGY SERVICES L.P.

3. Address of Operator

PO BOX 10460 MIDLAND TEXAS 79702

4. Well Location

Unit Letter L : 1980 feet from the SOUTH line and 810 feet from the WEST lineSection 32 Township 19S Range 34E NMPM County LEA

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

3643'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐CLOSED-LOOP SYSTEM ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐OTHER: ☐

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.

Please accept this report as the

Redhawk 32 State # 1 first date of injection 11/18/13

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

TITLE SENM FLUID SALES MGR. DATE 11/19/13

Type or print name DAVID ALVARADO E-mail address: david.alvarado@basicenergyservices.com PHONE: _____

For State Use Only

Accepted for Record Only

APPROVED BY:

FILE

DATE

11/21/2013

Conditions of Approval (if any):

NOV 21 2013