

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-28877
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-743
7. Lease Name or Unit Agreement Name Arco State
8. Well Number 2
9. OGRID Number 190595
10. Pool name or Wildcat Jalmat, TAN SIL-YATES-TRVRS(OIL)

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	✓
2. Name of Operator Endeavor Energy Resources, LP	
3. Address of Operator 110 N. Marienfeld St., Ste. 200 Midland, Tx 79701	
4. Well Location Unit Letter I : 1650 feet from the South line and 330 feet from the East line Section 3 Township 22S Range 35E NMPM County LEA	✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3600 GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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

NOTICE OF INTENTION TO:		SUBSEQUENT	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	INT TO PA <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATIONS <input type="checkbox"/>	P&A NR <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETIONS <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	P&A R <input type="checkbox"/>
OTHER: <input type="checkbox"/>		OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12-18-17 - Tag existing CIBP @ 3765 circulated hole clean w/9.5 MLF. Spotted 25sx cmt. PUH & spotted 30sx @ 1800.

12-19-17 - Tag plug @ 1440. Perf csg @ 800 could not sqz perfs spotted 25sx cmt @ 850. Tag plug @ 614 perf csg @ 460. Could not sqz perfs. Spotted 50sx cmt @ 500. Circulated to surface.

12-20-17 - Tag plug @ 40' topped off w/5sx cmt. Install dry hole marker.

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.
Restoration Due By 12-19-2018

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Owner DATE 12-22-2017

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: Kerry Fortner TITLE Compliance Officer DATE 1-9-18
Conditions of Approval (if any):

mw