

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

Form C-103
June 19, 2008

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.)		WELL API NO. 30-025-29110
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator JAY MANAGEMENT COMPANY, LLC		6. State Oil & Gas Lease No. 024643
3. Address of Operator 1001 WEST LOOP SOUTH, SUITE 750 HOUSTON, TX 77027		7. Lease Name or Unit Agreement Name Townsend State Com
4. Well Location Unit Letter <u>J</u> : <u>3806</u> feet from the <u>North</u> line and <u>2193</u> feet from the <u>East</u> line Section <u>3</u> Township <u>16S</u> Range <u>35E</u> NMPM County <u>LEA</u>		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4006' GR		9. OGRID Number 247692
		10. Pool name or Wildcat Edison Mississippian

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 ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

C.D.A. Temporarily abandon well to evaluate upper zone.

SET CIBP WITHIN 100'
OF TOP PERF. CAP W/ 35'
CMT IF BY WIRE LINE OR
25 x 25 CMT BY TBG.
LOAD WITH INHIBITED FLUID.

Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart

PROVIDE CURRENT WELLBORE
DIAGRAM.

Spud Date:

Rig Release Date:

WITH SUBSEQUENT C-103

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

SIGNATURE

Clayton Griffin

TITLE District Manager

DATE 10/30/2018

Type or print name Clay Griffin

E-mail address: cgriffin@jaymgt.com

PHONE: 574-707-5691

For State Use Only

APPROVED BY:

Mary Brown

TITLE

AO/I

DATE

10/30/2018

Conditions of Approval (if any):