

Submit 1 Copy 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 Rd., 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

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. 30-021-20593
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator WHITING OIL AND GAS CORPORATION		6. State Oil & Gas Lease No. 40241
3. Address of Operator 400 WILLINOIS STE 1300 MIDLAND, TX 79701		7. Lease Name or Unit Agreement Name FOUR WAY 2031 04
4. Well Location Unit Letter K 1650 feet from the SOUTH line and 1980 feet from the WEST line Section 4 Township 20N Range 31E NMPM County HARDING		8. Well Number 01
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4596' GR		9. OGRID Number 25078
		10. Pool name or Wildcat WILDCAT; SANTA ROSA (GAS)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01/08/2016 RIH SET CIBP @ 775'  
 02/14/2016 RIH TAG CIBP @ 775', PRESS TST CSG TO 500#; HELD, PMP 80 SXS CMT 775-SURF, TOP OFF CMT AT SURF W/S SXS CMT  
 02/22/2016 CLEAN SURF LOC, WELDED SURF PLATE, AND P&A MARKER

RE-SEEDING LOCATION WILL BE DONE DURING 2016 GROWING SEASON

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 Kay Maddox TITLE: REGULATORY ANALYST DATE: 02/22/2016

Type or print name Kay Maddox E-mail address: [kay.Maddox@Whiting.com](mailto:kay.Maddox@Whiting.com) PHONE: 432-638-8475

For State Use Only

APPROVED BY: [Signature] TITLE DISTRICT IV DATE 3/24/16  
 Conditions of Approval (if any):