

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

WELL API NO. 30-021-20645
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 313953
7. Lease Name or Unit Agreement Name STATE 2028 20
8. Well Number 01
9. OGRID Number 25078
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE 640
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5501' GR

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

2. Name of Operator
WHITING OIL AND GAS CORPORATION

3. Address of Operator
400 WILLINOIS STE 1300 MIDLAND, TX 79701

4. Well Location
Unit Letter J 1660 feet from the SOUTH line and 1748 feet from the EAST line
Section 20 Township 20N Range 28E NMPM County HARDING

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.

01/21/2016 RIH SET CIBP @ 2560', TST CSG TO 600 PSI, HELD, TAG CIBP @ 2595, PMP 25 SXS CMT 2595-2348', PMP 25 SXS CMT 831-584', SHOT PERFS @ 500' SQZ W/160 SXS CMT, CIRC CMT TO SURFACE OUT OF 9 5/8" ANNULUS, TOP OFF CMT 31'-SURF INSIDE 5 1/2" CSG
 01/25/2016 CLEANED, SMOOTHED SURF LOC, WELDED SURF PLATE & 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: 01/25/2016

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

For State Use Only

APPROVED BY: [Signature] TITLE DIST IV DATE 1/26/16

Conditions of Approval (if any):