Submit 1 Copy To Appropriate Distric	State of New Mexico HOBBS (OCD- RECEIVED 11/02/20 Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 8824		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-44144
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 874 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		DOODLE BUG STATE SWD
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other SWD		8. Well Number 1
2. Name of Operator	SERVICES, LLC	9. OGRID Number 372603
3. Address of Operator 1512 l		10. Pool name or Wildcat
	YER, CO 80202	SWD; DEVONIAN-SILURIAN (97869)
4. Well Location		, (*****)
Unit Letter G	: 1498 feet from the NORTH line and	2390 feet from the <u>EAST</u> line
Section 16	Township 22S Range 33E	NMPM LEA County
	11. Elevation (Show whether DR, RKB, RT, GR, et	c.)
3554.5		
12 Charle Appropriate Pay to Indicate Nature of Notice Papert or Other Date		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☒ P AND A ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐		
PULL OR ALTER CASING		
CLOSED-LOOP SYSTEM		
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.		
10/00/0000 NOTHERD OCD OF BUTENIT TO COLD		
10/28/2020-NOTIFIED OCD OF INTENT TO SPUD 10/30/2020-SPUD WELL		
10/30/2020-St OD WELL		
		11/4/2020 - PM NMOCD
Spud Date: 10/30/2020	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Gennile	r Elrad TITLE Sr. Regulatory Analyst	DATE_ 11/02/2020
-		
Type or print name JENNIFE For State Use Only	R ELROD E-mail address: _jelrod@chisho	olmenergy.com PHONE: 817-953-3728
TOT STATE USE OTHY		
	TITLE	DATE
Conditions of Approval (if any)	:	