

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 August 1, 2011

HOBBS OGD

## OIL CONSERVATION DIVISION

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

APR 15 2013

RECEIVED

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. / 30-025-22043
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 checked="" type="checkbox"/>
2. Name of Operator Jay Management Co., LLC		6. State Oil & Gas Lease No.
3. Address of Operator 2425 WEST LOOP SOUTH, SUITE 810; HOUSTON, TX 77027		7. Lease Name or Unit Agreement Name SOHIO STATE /
4. Well Location Unit Letter P- : 660 feet from the SOUTH line and 660 feet from the EAST line Section 4 Township 15 Range 33 E NMPM County LEA		8. Well Number 1 /
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 247692 ✓
		10. Pool name or Wildcat BAGLEY; PERMO PENN, NORTH

## 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: Test and repair casing leak

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## 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

April 11, 2013: move in rig and pulled tubing to test casing for repair of leak.

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 J. Monaghan TITLE Sr. Reg. Specialist DATE 4/12/13  
 Type or print name Julie Monaghan E-mail address: jmonaghan@ntglobal.com PHONE: 817-529-6700  
**For State Use Only**  
 APPROVED BY: [Signature] TITLE Dist. Mgr DATE 4-18-2013  
 Conditions of Approval (if any):

APR 18 2013

[illegible]