Submit I Copy To Appropriate District Office District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 State of New Mexico Minerals and Natural I	Form C-103 Resources Revised August 1, 2011
District II - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District III - (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	VISION 30-025-2 \$687 25 68 2 5 5 Indicate Type of Lease STATE ☐ FEE ✓
87505 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG B. DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SU	7. Lease Name or Unit Agreement Name Cooper Jal Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Injector	8. Well Number 151
2. Name of Operator	9. OGRID Number 263848
Resaca Operating Company 3. Address of Operator	10. Pool name or Wildcat
1331 Lamar St. Stc. 1450, Houston, TX 77010	Jalmat; T-Y-7R; Langlie Mattie; 7R-Q-G
4. Well Location	
Unit Letter A : 998 feet from the South line and 170 feet from the East line Section 24 Township 24S Range 36E NMPM Lea County	
11. Elevation (Show whether DR, RK)	Y ,
GL 3304'	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
ı	MEDIAL WORK ALTERING CASING
	MMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CA	SING/CEMENT JOB
_	_
OTHER: OTHER: OTHER: OTHER: OTHER:	HER: Pressure Test-MIT
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
Objective: Perform Mechanical Integrity Test.	
1.) MIRU Transport on 4/16/13.	
 Pressure tested annulus to 460 psi for 30 minutes- test was good (Packer @ 3240'; Top Perf- 3296'). Pulled pressure chart for NMOCD (NMOCD notified, test not witnessed). RD Transport and placed well back on injection. 	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of	
r hereby certify that the information above is true and complete to the best of	my knowledge and benef.
SIGNATURE TITLE Engi	neer Assistant DATE 4/24/13
Type or print name Melanic Reyes E-mail address: melanic. For State Use Only	reyes@resacaexploitation.com PHONE: (432) 580-8500
APPROVED BY: (Vany): TITLE UST.	DATE 3-6-101

MAY 06 2013



