

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

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-10

Revised July 18, 201

WELL API NO.

30-025-24999

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

HODGES

8. Well Number

1

9. OGRID Number

141402

10. Pool name or Wildcat

SWD; 7RQ

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 SWD (R-8137)

2. Name of Operator

FULFER OIL & CATTLE, LLC.

3. Address of Operator

PO BOX 1224

4. Well Location

Unit Letter 0 : 660 feet from the 5 line and 1980 feet from the E line

Section 8 Township 24S Range 36E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIATION 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.

FAILED MIT 3/6/14.
MIRU-PU. INSTALL BOP
RELEASE PKR
P.O.H. CHECKING F/TBG. LEAK

Spud Date:

4-16-75

Rig Release Date:

4-24-75

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

GARY W. WINK

TITLE

PRODUCTION FOREMAN

DATE

3/10/14

Type or print name

GARY W. WINK

E-mail address:

garywink@leenergy.com

PHONE: 575-390-5895

For State Use Only

APPROVED BY:

Mary Brown

TITLE

Compliance Officer

DATE

3/13/2014

Conditions of Approval (if any):

MAR 17 2014