| Submit 3 Copies To Appropriate District | State of New Mexico | | | Form C-103 |
|---|---|--------------------|-------------------------------|-----------------------|
| Office District I | Energy, Minerals and Natural Resources | | | May 27, 2004 |
| 1625 N. French Dr., Hobbs, NM 88240 | | 1 | WELL API NO. | |
| District II | OIL CONSERVATION DIVISION | | 30-025-35866 | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | 1220 South St. Francis Dr. | | 5. Indicate Type of Lease | - |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87505 | | STATE FEE x | |
| District IV | Santa Te, Nivi 673 | ⁰³ 6 | 6. State Oil & Gas Lease | No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | • | | | |
| SUNDRY NOT | ICES AND REPORTS ON WELLS | 7 | 7. Lease Name or Unit A | greement Name |
| (DO NOT USE THIS FORM FOR PROPO | SALS TO DRILL OR TO DEEPEN OR PLUG CATION FOR PERMIT" (FORM C-101) FOR | BACK TO A | W.D. Grimes (NCT | |
| DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) | CATION FOR PERMIT" (FORM C-101) FOR | Soet On | B. Well Number | |
| 1. Type of Well: Oil Well | Gas Well Other | 200 | #26 | |
| 2. Name of Operator | | 1 20. | OGRID Number | |
| Texland Petroleum-Hobbs, L | LC / | ~ <015 | 113315 | |
| 3. Address of Operator | Fort Worth, Texas 76020 | 1 | 10. Pool name or Wildcar | • |
| 777 Main Street, Suite 3200, | Fort Worth Tevas 76020 | (ED) | Hobbs, Upper Blineb | |
| | Tolt Worth, Texas 70020 | | Toobs, Opper Billieon | ı y |
| 4. Well Location | 585 | 920 | | |
| Unit LetterD: | feet from theNorth_ li | | feet from theWest | iline |
| Section 32 | Township 18S | Range 38E | NMPM Lea | County |
| | 11. Elevation (Show whether DR, R | PKB, RT, GR, etc.) | | |
| | 3638' | | | 1.4 |
| Pit or Below-grade Tank Application 🗌 | or Closure | | | |
| Pit typeDepth to Groundw | aterDistance from nearest fresh water | er well Distan | ce from nearest surface water | · |
| Pit Liner Thickness: mil | Below-Grade Tank: Volume | bbls; Cons | truction Material | |
| 12 Check | Appropriate Box to Indicate Nat | ure of Notice R | enort or Other Data | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | |
| NOTICE OF IN | ITENTION TO: | SUBSI | EQUENT REPORT | OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON ☐ F | REMEDIAL WORK | ☐ ALTER | ING CASING 🔲 |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILL | .ING OPNS.□ P AND | A 🗆 |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMENT J | IOB 🗌 | |
| | 3/EARS _ | | | |
| OTHER: Request to extend TA Status | | | | |
| 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion | | | | |
| or recompletion. | | | | |
| T. A. Cu | . 7/25/15 | | | |
| | tus expires 7/25/15 | | | |
| CIBP w | vas set @ 5753' | | | |
| | | | | |
| See attached Well Bore Schematic | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| I hereby certify that the information | above is true and complete to the best | of my knowledge a | and helief I further cortific | that any nit as halow |
| | closed according to NMOCD guidelines , | | | |
| 8 | | g L | (| approved plan |
| SIGNATURE VIELE | ALTIT LEINC | Regulatory Ar | nalystDATE | 6/10/15 |
| | | | | |
| Type or print name Vickie Smi | th E-mail address: VSr | nith@texpetro.c | om Telephone No. 5 | 75-433-8395 |
| For State Use Only | 0 | | 1 | , 1 |
| | MK | inta | 20.01 | 1-/11/200 |
| APPROVED BY: | Ablown TITLE D | Hell Jul | DEWULOU DATE | 4/11/CDB |
| Conditions of Approval (if any): | | 0 | | " |

NO PROD REPORTED-34-MONTHS JUN 1 1 2015 M

Grimes NCT-A #26

Current Wellbore Schematic

Drl'd 5/02

