Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		30-025-243340000
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III - (505) 334-6178	1220 South St. Francis Dr.	STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		o. State on & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Arco Crump
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well Other (Injection)	8. Well Number 2 /
2. Name of Operator Tora Oil & Gas	88252 FEB 1 8 2016	9. OGRID Number
3. Address of Operator	185010	10. Pool name or Wildcat
P.O. box 1267 Jal, New Mexico	88252 FEB	Langley Mattix
4. Well Location	CENED	
	feet from theSouth_ line 050_feet from th	ne East line
Section 1		NMPM Lea County
Section	11. Elevation (Show whether DR, RKB, RT, GR, et	
	3345 DF	10.7
	30 10 21	
12. Check A	Appropriate Box to Indicate Nature of Notice	e, Report or Other Data
NOTICE OF IN	ITENTION TO:	DOCUMENT DEPORT OF
NOTICE OF IN		BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WO	
TEMPORARILY ABANDON		PRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	NT JOB X
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	□ OTHER:	
OTHER:	oleted operations. (Clearly state all pertinent details, a	and give pertinent dates including estimated date
	ork). SEE RULE 19.15.7.14 NMAC. For Multiple C	
proposed completion or rec		ompletions. Attach wendore diagram of
proposed completion of 100	ompiction.	
Pull the packer test and find casing	leak at 2935', isolate the hole from 2930-2960 squeez	ze 80 sacks class c cement w/ 2% cacl2 drill out
the cement across the hole in the cas		Ze ou sacks. class c coment w/ 2/0 caciz.arm out
	perforations (3454) set ok. Run 30 minute chart. The o	chart was approved by Maxie Brown, Pickle the
well with packer fluid. Rig down and		shart was approved by Maxie Brown. I lekte the
The state of the s		
Smud Date:	Rig Release Date:	
Spud Date:	Rig Release Date.	
I hereby certify that the information	above is true and complete to the best of my knowled	lge and belief.
1		
SIGNATURE	TITLE MAR	DATE 2-/8-/4
SIGNATURE W.C. Constitution	1. The state of th	
Type or print name last Agas	steong I E-mail address: GODSER QUA	PHONE: 575.631-7192
For State Use Only	Sipore Deman address. Goodeway	THORE, CONTRACTOR TO THE TOTAL THE TOTAL TO THE TOTAL TOT
Por State Ost Omi		MA DATE 3/2/16 MAR 03 1006
APPROVED BY:	manch TITLE Steff Man	DATE 3/2/16 MAR 03 MM
		MA

