

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

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-41076
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Lookin Good 34 State Com
8. Well Number 1H
9. OGRID Number 14187
10. Pool name or Wildcat Grama Ridge; Bone Spring, North

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 ☐

2. Name of Operator
Marshall & Winston, Inc. ✓

3. Address of Operator
P. O. Box 50880, Midland, TX 79710-0880

4. Well Location
Unit Letter D : 330 feet from the North line and 660 feet from the West line
Section 34 Township 20S Range 35E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3722' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: Commence Drilling <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

01/28/16 Depth 1080'. Spud well @ 9:30 AM.

01/30/16 Depth 2010'. Ran 48 jts 13 3/8" 54.5# J-55 8rd csg. Set @ 1991'.

01/31/16 Depth 2010'. O-Tex cmted csg w/ lead 1245 sx Class C, 4% gel + 1/4 PPS CelloFlake + 5% salt + 2% CaCl2 & Tail 415 sx Class C, 4% gel + 1/4 PPS CelloFlake + 5% salt + 2% CaCl2. Circ 329 sx to surface. WOC 5 hrs.

Spud Date:

01/28/16

Rig Release Date:

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

SIGNATURE Sherry Roberts TITLE Operations Secretary DATE 02/01/16

Type or print name Sherry Roberts E-mail address: sroberts@mar-win.com PHONE: 432-684-6373

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 02/30/16

Conditions of Approval (if any):

APR 14 2016