

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. 30-025-34982	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-1040-14	
7. Lease Name or Unit Agreement Name Tin Cup 25 State	
8. Well Number 1	
9. OGRID Number 206511	
10. Pool name or Wildcat Delaware	
4. Well Location Unit Letter M : 660 feet from the South line and 660 feet from the West line Section 25 Township 22S Range 34E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3426' GR	
SUNDY 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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator GMT Exploration Company	
3. Address of Operator 1560 Broadway Suite 200, Denver, CO 80222	

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 type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input checked="" type="checkbox"/> Begin Disposal		OTHER: <input checked="" type="checkbox"/> Step rate test results	
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.			

GMT commenced operations on this location on 08-12-2016.
The objective was converting the Tin Cup from permanent abandoned status to a salt water disposal well. After drilling out plugs, conditioning the hole and running in casing on 08-18-2016, operations cemented the string in place up into the interlock. Plan was to tie into the existing 9- 5/8" casing, 5039'. Due to considerable lost returns of ~340bbl cement, interlock was not achieved. Retainer was then set at 5090' and casing was perforated, cement squeezed, returns were noted at surface. Per Mr Maxie Brown and Phillip Goetz with NMOCD, this was the commission's preferred completion. Initial CBL indicating pre-squeeze top of cement, the daily report, and pressure test are included herein. Please direct any questions with respect to this submittal to Keith Kress and/or Marissa Walters.

Spud Date: Rig Release Date:

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

SIGNATURE  TITLE Petrotech DATE 9/28/16

Type or print name Marissa Walters E-mail address: mwalters@gmtexploration.com PHONE: 303.586.9275

For State Use Only

APPROVED BY:  TITLE Dist. Supervisor DATE 9/29/2016

Conditions of Approval (if any):

HOBBS

District I
1615 N. French Dr., Hobbs, NM 88240
Phone: (505) 793-6161 Fax: (505) 793-6720

SEP 29 2016

RECEIVED

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Gm1 Exploration</i>	API Number <i>30-005-34982</i>
Property Name <i>Tin Cup 25 State</i>	Well No. <i>1</i>

Surface Location

UL - Lot <i>17</i>	Section <i>25</i>	Township <i>22S</i>	Range <i>34E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>W</i>	County <i>LRA</i>
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Well Status

TA'D WELL YES	NO	YES	SHUT-IN NO	INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <i>8/31/16</i>
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OBSERVED DATA

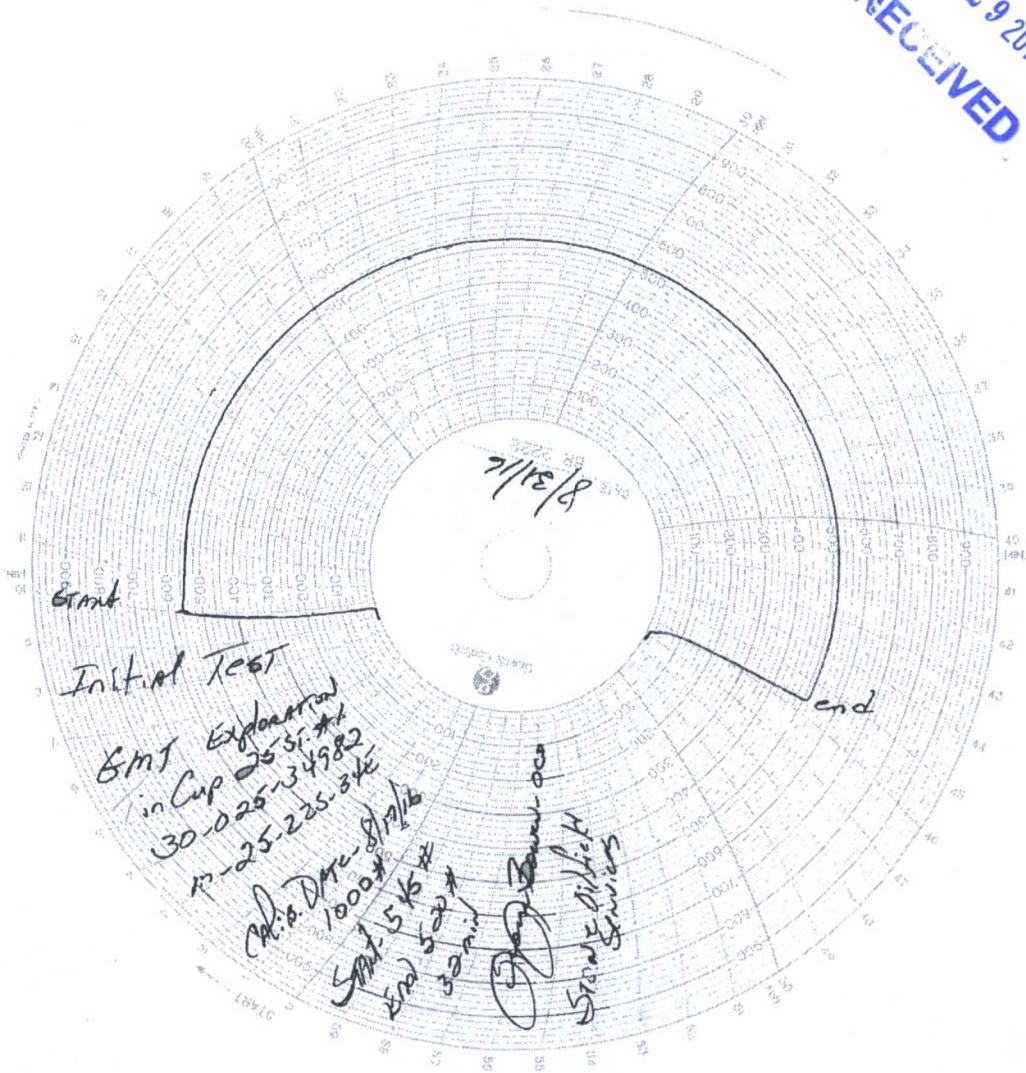
	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Case	(E) Tubing
Pressure	<i>0</i>	<i>—</i>	<i>—</i>	<i>0</i>	<i>0</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 <i>—</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR <i>—</i>
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS <i>—</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid Injected for Waterflood if applicable
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		
Date: <i>8/31/16</i>	Phone:	
Witness: <i>[Signature]</i>		

RBDMS ✓
MSB

HOMB-OCD
SEP 29 2016
RECEIVED



Rev 4-26-12