| Submit I Copy To Office | opy To Appropriate District State of New Mexico | | | | | Form C-103 | | | | |
|---|---|---------------|----------------|---------------------------|------------|------------------------|--|------------------|---------------|---------------------------|
| District I - (575) 3 | 93-616brs OC | Energ | y, Minerals | and Natura | al Resor | urces | WELL API | | vised July 18 | 3, 2013 |
| 1625 N. French Dr. Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1 2017 1220 South St. Francis Dr. | | | | | | | 30-025-43558 | | | |
| 811 S. First St., Ar | VATION DIVISION | | | 5. Indicate Type of Lease | | | | | | |
| 1000 Dio Prayon Pd Arten NIM 97410 | | | | | | | STATE X FEE | | | |
| District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM/F | | | | | | | 6. State Oil | & Gas Lease | No. | |
| 87505 | | | | | | | 5 Y N | TT '. A | | |
| 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 | | | | | | | 7. Lease Name or Unit Agreement Name Piper 2 State | | | |
| PROPOSALS.) | | | | | | | 8. Well Nu | | | |
| 1. Type of Well: Oil Well Gas Well Other | | | | | | | | #1 | | |
| Name of Operator Riley Exploration Operating Company, LLC | | | | | | | 9. OGRID 371 | | | |
| 3. Address of Operator | | | | | | | 10. Pool name or Wildcat | | | |
| 2008 N. Council Blanchard, OK 73010 | | | | | | | WC-025 G-06 S193702D; Devonian | | | |
| 4. Well Location | | | | | | | | | | |
| | | | | | | | | - | | _line |
| Section 2 Township 19S Range 37E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | | | | | | |
| (3.10.1) | | | | | | | | | | |
| | 10 61 1 | | ~ · · · | | | | | | | |
| | 12. Check A | ppropriat | e Box to In | dicate Na | iture of | Notice, I | Report or C | ther Data | | |
| | NOTICE OF IN | TENTION | N TO: | | | SUBS | SEQUENT | REPORT | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | | | | | | | | | NG CASIN | |
| TEMPORARILY ABANDON | | | | | | | | | 4 | |
| PULL OR ALTE | | MULTIPLI | E COMPL | | CASING | G/CEMENT | JOB | X | | |
| CLOSED-LOOI | | | | | | | | | | |
| OTHER: | | | | | OTHER | | eted drilling 8 | k rig released | | X |
| 13. Describ | e proposed or compl | eted operati | ions. (Clearly | state all pe | ertinent d | letails, and | give pertiner | nt dates, includ | ing estimat | ed date |
| | ng any proposed wo | | ULE 19.15.7. | 14 NMAC. | For Mu | ıltiple Com | pletions: At | tach wellbore | liagram of | |
| propose | ed completion or reco | impletion. | | | | | | | | |
| The Piper 2 | 2 State #1 well was s | pud on Mar | ch 29, 2017. | | | | | | | |
| Hole Size | Casing Size | Depth | Cement, sx | Top of Co | ement | Determin | ed By: | Notif | ications | |
| 17 ½" | 13 3/8" 54,50# | 1725' | 1330 | 0 | | Circulated surface | 160bbls to | | sing & Cem | nent job to 7 @ 8:20am |
| 12 1/4" | 9 5/8" 36# | 3,492 | 863 | 0 | | Circulated surface | 50bbls to | Intermediat | e casing & | Cement job |
| 8 3/4" | 7" 26# | 95,00° | 1410 | Est. 100' | | suriace Plan to run | CBL on | | | 7 @ 4:35pm |
| | | _ | _ / | DDU XVV | | June 2017. | | No notificat | tion mad | |
| | De | nie | | | | report once | | | | |
| | | | · (N | PRE | =99U | confirmed. | TES | 厂) | | |
| Snud Date: | | | Pia F | Release Date | a | | _ | | | |
| Spud Date: | March 29, 2017 | | Kig i | Celease Dan | c | May 5, 201 | 7 | | | |
| | | | | | | | | | | |
| I hereby certify t | that the information | above is true | and complet | te to the bes | st of my | knowledge | and belief. | | | |
| , | D 13 | | | | | | | | | |
| SIGNATURE_(| Jan - U | Jink | TITI | E Regul | latory Co | ompliance : | Specialist | DATE3 | /27/17 | |
| Type or print nat For State Use O | me <u>Laura Winkle</u> Inly | | E-ma | ail address: | laurawin | kler@riley | exploration.c | ONE:_ | 405-485-8 | 200 |
| APPROVED BY | 7: | | TITI | E | / | | | DATE | 9 | |
| Conditions of Ap | | | | od | 1 | 10 11 | RESSIL I | E TE | 11 | |
| | | | em | CH | 1 | 0100 | 2000 | | / | |
| APPROVED BY: Conditions of Approval (if any): Denied No PREHIURE TEM PAUL KAUTER STATE. NM-US | | | | | | | | | | |
| | | 1. | , | | | | | | | |