

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
HOBBS **OCD** Minerals and Natural Resources
SEP 29 2017
RECEIVED
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-025-42652
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator MURCHISON OIL & GAS, INC.		6. State Oil & Gas Lease No.
3. Address of Operator 7250 DALLAS PARKWAY, STE. 1400, PLANO, TX 75024		7. Lease Name or Unit Agreement Name JACKSON UNIT
4. Well Location Unit Letter <u>O</u> : <u>200</u> feet from the <u>SOUTH</u> line and <u>1640</u> feet from the <u>EAST</u> line Section <u>21</u> Township <u>24S</u> Range <u>33E</u> NMPM LEA County		8. Well Number 030H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3532 GR		9. OGRID Number 15363
		10. Pool name or Wildcat TRIPLE X; BONE SPRING, WEST

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: Request for TA Extension <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.

The Temporary Abandonment Status for this well expired on 4/27/17. We hereby request permission to re-test and apply for TA extension through 4/27/18.

**Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart**

Spud Date:

08/17/2015

Rig Release Date:

09/15/2015

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

SIGNATURE [Signature] TITLE Vice President Operations DATE 9/25/17

Type or print name: Gary Cooper E-mail address: rcooper@jdmii.com PHONE: 972-931-0700

For State Use Only

APPROVED BY: [Signature] TITLE AD/II DATE 9/25/2017

Conditions of Approval (if any):

MB