

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 OGD** Minerals and Natural Resources

JUL 11 2018

RECEIVED

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

Revised July 18, 2013

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		<p>WELL API NO. <b>30-025-10920</b></p>
<p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other - <b>SWD</b></p>		<p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p>
<p>2. Name of Operator <b>Western Refining Company, LP</b></p>		<p>6. State Oil &amp; Gas Lease No.</p>
<p>3. Address of Operator <b>PO Box 1345 Jal, NM 88252</b></p>		<p>7. Lease Name or Unit Agreement Name <b>Shell State</b></p>
<p>4. Well Location Unit Letter <b>L</b> : <b>1980</b> feet from the <b>S</b> line and <b>660</b> feet from the <b>W</b> line Section <b>32</b> Township <b>23S</b> Range <b>37E</b> NMPM <b>Lea</b> County</p>		<p>8. Well Number <b>13</b></p>
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.)</p>		<p>9. OGRID Number <b>248440</b></p>
<p>10. Pool name or Wildcat <b>96108 SWD; Grayburg</b></p>		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
 DOWNHOLE COMMINGLE ☐  
 CLOSED-LOOP SYSTEM ☐  
 OTHER: ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS. ☐ P AND A ☐  
 CASING/CEMENT JOB ☐  
 OTHER: ☐

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 annual Radioactive Tracer Survey will be conducted on Thursday, 7/12/18, in order to confirm all fluids are going into the perforated interval.

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

*Will H. George*

TITLE

*Consulting Engineer*

DATE

*7/6/18*

Type or print name

*Will George*

E-mail address:

*will@longquist.com*

PHONE:

*(512) 600-0718*

For State Use Only

APPROVED BY:

*Mary Brown*

TITLE

*AO/I*

DATE

*7/11/2018*

Conditions of Approval (if any):

*mb*