

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. 30-025-43117
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-2121
7. Lease Name or Unit Agreement Name County Fair BTY State
8. Well Number 1H
9. OGRID Number 372031
10. Pool name or Wildcat WC-025 S-09 S253502D Wildcat; Upper Wolfcamp

OCD – HOBBS
02/07/2018
RECEIVED

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator OneEnergy Partners Operating, LLC	
3. Address of Operator 2929 Allen Parkway, Suite 200, Houston, TX 77019	
4. Well Location Unit Letter <u>D</u> : <u>200</u> feet from the <u></u> North <u></u> line and <u>400</u> feet from the <u></u> West <u></u> line Section <u>2</u> Township <u>25S</u> Range <u>35E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3254'	

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 type="checkbox"/>		OTHER: Tubing Installation <input checked="" 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.

12/19/2017 – set packer at 11,800'; pressure tested successfully.
12/21/2017 – Ran 2-3/8" tubing and gas lift valves; circulated; pumped plug.
12/23/2017 - Swabbed well back on.

Spud Date: 5/14/2017

Rig Release Date: 6/15/2017

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

SIGNATURE Rachael Overbey TITLE Consultant DATE 12/23/2017
Type or print name Rachael Overbey E-mail address: rachaeloverbey@reenergygroup.com PHONE: 303-570-4057
For State Use Only

APPROVED BY: [Signature] TITLE DATE 02/08/2018
Conditions of Approval (if any):