

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. 30-025-44654
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 320645
7. Lease Name or Unit Agreement Name MAGNOLIA 26 36 22 STATE COM
8. Well Number 115H
9. OGRID Number 372224
10. Pool name or Wildcat [98234] WC-025 G-09 S263619C; WOLFCAMP

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 <input type="checkbox"/>	
2. Name of Operator AMEREDEV OPERATING, LLC	
3. Address of Operator 2901 VIA FORTUNA, STE. 600 AUSTIN, TX 78746	
4. Well Location Unit Letter <u>B</u> : <u>200</u> feet from the <u>NORTH</u> line and <u>2380</u> feet from the <u>EAST</u> line Section <u>27</u> Township <u>26S</u> Range <u>36E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2906' GL	

OCD - HOBBS
03/27/2020
RECEIVED

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: PERMIT EXTENSION REQUEST <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.

AMEREDEV OPERATING, LLC would like to request a one-year extension of the drilling permit for the MAGNOLIA 26 36 22 STATE COM 115H.

NEW APD EXPIRATION DATE 04/06/2021

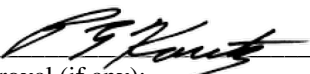
Spud Date:	<input type="text"/>	Rig Release Date:	<input type="text"/>
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Christie Hanna TITLE Regulatory Coordinator DATE 4/6/2020

Type or print name CHRISTIE HANNA E-mail address: channa@ameredev.com PHONE: 737-300-4723

For State Use Only

APPROVED BY:  TITLE _____ DATE 04/27/2020
Conditions of Approval (if any): _____