

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

OCD – REC'D 6/29/2020

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-025-46344</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Duck Hunt 1 State Com</b>
8. Well Number <b>302H</b>
9. OGRID Number <b>372165</b>
10. Pool name or Wildcat <b>Antelope Ridge: Bone Spring, N 2205</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3368 GL</b>

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 <b>Centennial Resource Production, LLC</b>	
3. Address of Operator <b>1001 17th Street, suite 1800, Denver, CO 80202</b>	
4. Well Location Unit Letter <b>I</b> : <b>2039</b> feet from the <b>South</b> line and <b>1985</b> feet from the <b>East</b> line Section <b>1</b> Township <b>23S</b> Range <b>34E</b> NMPM County <b>Lea</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3368 GL</b>	

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: <b>Completion</b>	<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.

11/25/19 Test production casing to 10,500# for 30 mins, good test.  
11/25/19 - 12/9/19 Perf & Frac 30 stages, 10,072 - 17,158 w 15,674,564 gals slick water, 19,554,059# 100 mesh sand. 1608 holes.  
12/13/19 Drill out plugs. PBTD @ 17,168. Turn well to production.

Accepted - NMOCD

Spud Date:

9/19/19

Rig Release Date:

11/09/19

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

SIGNATURE K. Schlichting TITLE Sr. Regulatory Analyst DATE 6/29/20

Type or print name Kanicia Schlichting E-mail address: kanicia.schlichting@cdevinc.com PHONE: 720-499-1537

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):