

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

**HOBBS OCD** State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

OCT 04 2013  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
**RECEIVED**

WELL API NO. <b>30-025-41448</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Nocaster 19 Federal</b>
8. Well Number <b>3H</b>
9. OGRID Number <b>270329</b>
10. Pool name or Wildcat <b>Bell Lake; Bone Spring</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3602.9 GR</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 ☒ Gas Well ☐ Other ☐

2. Name of Operator  
**Endurance Resources LLC**

3. Address of Operator  
**203 W Wall Suite 1000 Midland TX 79701**

4. Well Location  
Unit Letter **O** : **330** feet from the **south** line and **1980** feet from the **east** line  
Section **19** Township **23S** Range **34E** NMPM **Lea** County **NM**

**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 ☐

**SUBSEQUENT REPORT OF:**  
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Change Pool Designation ☒

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.

Request change of pool designation from Bell Lake; Bone Spring (5130) to Antelope Ridge; Bone Spring, West (2209) Pool ID.

OPER OGRID NO. **270329**  
PROPERTY NO. **40168**  
POOL CODE **2209**  
EFF. DATE **10/10/13**  
API NO. **30-025-41448**

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

*M. A. Sirgo, III*

TITLE **Engineer**

DATE **10-2-2013**

Type or print name

**M. A. Sirgo, III**

E-mail address:

**manny@enduranceresourcesllc.com**

PHONE:

**For State Use Only**

APPROVED BY:

*[Signature]*

TITLE

**Petroleum Engineer**

DATE

**OCT 11 2013**

Conditions of Approval (if any):

**OCT 15 2013**