

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
200 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
May 27, 2004

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.)		WELL API NO. 30-005-21080
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ENDEAVOR ENERGY RESOURCES, LP		6. State Oil & Gas Lease No. E-9089
3. Address of Operator 110 N. MARIENFELD STREET, SUITE 200 MIDLAND, TX 79701		7. Lease Name or Unit Agreement Name WAKONDA STATE
4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>660</u> feet from the <u>EAST</u> line Section <u>16</u> Township <u>8S</u> Range <u>33E</u> NMPM County <u>CHAVES</u>		8. Well Number 2
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4372.0' G.L.		9. OGRID Number 190595
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat CHAVEROO- SAN ANDRES
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check ☒ Approved for Plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Specifically for Subsequent Report of Well Plugging) which may be found at OCD web page under forms! www.emnrd.state.nm.us/oed

Indicate Nature of Notice, Report or Other Data

SUBSEQUENT REPORT OF:	
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

Proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10/3/13- SET 5 1/2 CIBP CIRC. WELL SPOT 25SX CMT. ON CIBP PRES. TEST TO 700 PSI, HELD GOOD. SPOKE W/ MAXIE BROWN, ADVISED TO MOVE ON W/ OUT ANY TAGS.

10/14/13- TAG @ 3900' PUH @ 3500' SPOT 25SX PUH @ 1925' SPOT 25SX PUH @ 496' SPOT 50SX CMT TO SURF.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE General Manager DATE 10-8-13

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: [Signature] TITLE DEPT MGR DATE 10-15-2013

Conditions of Approval (if any):

OCT 15 2013