Office Office	State of New Me		Form C-103
<u>District I</u> - (575) 393-6161	Energy, Minerals and Natural Resources		Revised August 1, 2011 ELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	OIL CONSERVATION DIVISION		30-025-28511
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178			Indicate Type of Lease
100 Rio Brazos Rd., Aztec, NM 87410 HOBBS OCISO South St. Transis Dr.		cis Dr.	STATE X FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	•	6.	State Oil & Gas Lease No.
87505	JAN 27 2014	7	Lagge Name of Light Agreement Name
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 CONTENTS (FORM C-101) FOR SUCH PROPOSALS.)			Lease Name or Unit Agreement Name e A A/C 3
1. Type of Well: Oil Well Gas Well Other Injection		8.	Well Number 12
2. Name of Operator Merit Energy Company		9.	OGRID Number 14591
3. Address of Operator 13727 Noel Road, Ste. 1200			Pool name or Wildcat
Dallas, TX 75240		Lani	lie Mattix SR-Q-GB
4. Well Location			
	25 feet from the North	line and 2615	feet from the East line
Section 10	Township 23S Ra		1PM County Lea
	11. Elevation (Snow whether DK,	KKD, KI, UK, elc.)	
12. Check	Appropriate Box to Indicate Na	ature of Notice, Rep	ort or Other Data
NOTICE OF IN	NTENTION TO:	SUBSEC	QUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			☐ ALTERING CASING ☐
— — — — — — — — — — — — — — — — — — —		COMMENCE DRILLING	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JOE	3 🗆
DOWNHOLE COMMINGLE			
OTHER: 6 MONTH E		OTHER:	
	pleted operations. (Clearly state all p ork). SEE RULE 19.15.7.14 NMAC		e pertinent dates, including estimated date
proposed completion or re-		For wantiple Complet	6 MONTAS
• •	•	ity. TA status will then	be requested for 3 years while planning
and work is done re-activate the	well in a waterflood pilot program wi	thin the Jalmat field. Th	ianks.
_			
Production	Inj.		
302 MONT			
302 101013			
Spud Date:	Rig Release Da	te:	
			1.00
I hereby certify that the information	above is true and complete to the be	st of my knowledge and	belief.
1160			
SIGNATURE	TITLE Regulat	tory Analyst	DATE <u>01/24/2014</u>
Type or print name <u>Matt Ogden</u> For State Use Only	E-mail address	: matt.ogden@meritene	rgy.com PHONE: (972)628-1603
APPROVED BY: Wah C	Whitaham TITLE Come	Disne Office	M DATE 01-28-2014
Conditions of Approval (if any):			1
			JAN 28 2014