Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1,2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OH CONCEDUATION DIVIGION	30-025-37910
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410		STATE X FEE 6. State Oil & Gas Lease No.
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM JAN	2 7 2014	6. State Off & Gas Lease No.
8/303	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)		State A A/C 2
1 Type of Well: Oil Well Gas Well Other Animalian		8. Well Number 95
Name of Operator Merit Energy Company		9. OGRID Number 14591
3. Address of Operator 13727 Noel Road, Ste. 1200		10. Pool name or Wildcat
Dallas, 1X 75240		Jalmat Tan Yates 7 Rivers
4. Well Location		
Unit Letter F : 198		
Section 8 Township SS Range 36E NMPM County Lea / 11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
11. Elevation (Snow whether DR, RRB, R1, GR, etc.)		
	00	
12. Check App	propriate Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR		RK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI		
PULL OR ALTER CASING DOWNHOLE COMMINGLE	IULTIPLE COMPL CASING/CEMEN	11 JOB 🗆
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OTHER: 3 YRS.	d operations. (Clearly state all pertinent details, an	ad aire northant datas including actimated data
	. SEE RULE 19.15.7.14 NMAC. For Multiple Co	
Merit Energy Company plans to run a MIT proving mechanical integrity. TA status will then be requested for years while planning		
and work is done re-activate the well in a waterflood pilot program within the Jalmat field. Thanks.		
		<i>'</i>
Spud Date:	Rig Release Date:	
I hereby cartify that the information abo	ve is true and complete to the best of my knowled	ge and heliaf
Thereby certify that the information abo	ve is true and complete to the best of my knowled;	ge and benef.
SIGNATURE	TITLE Regulatory Analyst	DATE 01/24/2014
SIGNATURE CO TO	THEE Regulatory Alialyst	DATE 01/24/2014
Type or print name Matt Ogden	E-mail address: matt.ogden@me	eritenergy.com PHONE: (972)628-1603
For State Use Only	U_{1} , A_{1}	ντ ς
APPROVED BY: Wall Whitslem TITLE Compliance Officer DATE 01-28-2014		
Conditions of Approval (if any):	1	7
		JAN 28 2014