

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 87401
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

RECEIVED HOBBS OCD MAR 20 2014		WELL API NO. 30-025-26307
SUNDY 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.)		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Brine Well</u>		6. State Oil & Gas Lease No. 25087
2. Name of Operator PAB SERVICES DBA SALTY Dog Inc.		7. Lease Name or Unit Agreement Name Brine Supply Well
3. Address of Operator PO Box 190 Lubbock TX 79408		8. Well Number 601
4. Well Location Unit Letter <u>J</u> : <u>1980</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>5</u> Township <u>19S</u> Range <u>36E</u> NMPM County		9. OGRID Number 184208
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3963		10. Pool name or Wildcat BSW + SALADO

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 checked="" 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"/>			
OTHER: <input checked="" type="checkbox"/>		OTHER: <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.

Rigged up pulling unit & salt
dropped sinker rod found plug AT 263 Ft
pump down tubing with pump truck to melt salt rigging
Rig down pulling unit
put back in operation

Spud Date:

Rig Release Date:

MIRU7

3-19-14

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

SIGNATURE

JIM SAYRE

TITLE

MANAGER

DATE

3-19-14

Type or print name

JIM SAYRE

E-mail address:

JIM@the standard energy.com

PHONE:

575-390-6006

For State Use Only

APPROVED BY:

Michael White

TITLE

Compliance Officer

DATE

03/21/2014

Conditions of Approval (if any):

MAR 24 2014