Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	· · · · · · · · · · · · · · · · · · ·	WELL API NO. 30-025-29870
811 S. First St., Artesia, NM 88210	NSERVATION DIVISION 60 South St. Francis Dr.	5. Indicate Type of Lease
1000 D:- D D.1 A NIM 07410	· -	STATE STATE FEE
<u>District IV</u> - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		B 9560
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL O DIFFERENT RESERVOIR. USE "APPLICATION FOR PERI		N. M.: "PO" Com NOT 1
PROPOSALS.)	HOBBS OCD	New Mexico "BG" State NCT-1 8. Well Number 10
1. Type of Well: Oil Well Gas Well 2. Name of Operator	Other	O OCRID Number
CrownQuest Operating, LLC	MAR 2 4 2014 ~	213190
3. Address of Operator	W(1)(# 1, 2017	10. Pool name or Wildcat
500 W. Texas Ave. STE 500, Midland, TX 79710		Saunders Permo Upper Penn
4. Well Location RECEIVED		
Unit Letter_O :990 feet from theSouth _ line and1980 feet from theEast line		
		33E NMPM Lea County
11. Elevation	(Show whether DR, RKB, RT, GR, etc.,	
12 Check Annronriate R	ox to Indicate Nature of Notice,	Penort or Other Data
•••		Report of Other Data
NOTICE OF INTENTION T	 	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND A	= 1	<u> </u>
TEMPORARILY ABANDON ☐ CHANGE PLA PULL OR ALTER CASING ☐ MULTIPLE CO	<u> </u>	-
	Extension	1306
CLOSED-LOOP SYSTEM \[\begin{array}{cccccccccccccccccccccccccccccccccccc		
	que(T \ 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.		
D. Jackson	•	
Procedure: 1. Rig up pump truck		
 Load & test CIBP and casing to 550 psig for 30 minutes. 		
	•	
Spud Date:	Rig Release Date:	
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	TITLE Lease Manager	DATE 3/24/2014
SIGNATURE	TITLE LOGGE Manager	DATE 3/24/2014
Type or print name Brandon Willis	E-mail address: bwillis@crov	wnquest.com _{PHONE:} 432-528-9830
For State Use Only		
ADDROVED BY BURNEY	_ TITLE Staff Wanage	DATE 3.26./4
APPROVED BY: Survamale Conditions of Approval (if any):	- IIILE VIATE VIJANOGE	DATE 3.26./4

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MAR 86 2014