| Submit 1 Copy To Appropriate District Office  | State of New Mexico   |                    | Form C-103                                     |                     |
|---|---|--------------------|--|---------------------|
| <u>District I</u> – (575) 393-6161<br>1625 N. French Dr. Hobbs, NM 88240  | strict 1 = (575) 393-6161 Energy, Minerals and Natural Resources  |                    | Revised August 1, 2011 WELL API NO.            |                     |
| District II — (575) 748-1283  | Strict II – (575) 748-1283  OIL CONSERVATION DIVISION   |                    | 30-025-09198                                   |                     |
| District III – (505) 334-6178   | 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM <u>District III</u> – (505) 334-6178  1000 Rio Provo Rd. Artes NM 87410 |                    | 5. Indicate Type of Lease  STATE ☐ FEE ☒       |                     |
| District IV – (505) 476-3460 Santa Fe, NM 87505   |   | 6. State Oil & Gas |  |                     |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  |   |                    |  |                     |
| SUNDRY NOTICES AND REPORTS ON WELLS   |   |                    | 7. Lease Name or U                             | Jnit 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 |   | Emery King S.E.    | /  |                     |
| PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other   |   |                    | 8. Well Number 5                               |                     |
| Type of Well: Oil Well  |   |                    | 9. OGRID Number 143199                         |                     |
| ENERVEST OPERATING LLC  |   |                    |  |                     |
| 3. Address of Operator<br>10012 Fannin St., Suite 800, Houston, TX 77002  |   |                    | 10. Pool name or Wildcat Langle Mattix (7 R-Q) |                     |
| 4. Well Location  |   |                    | Bungle Mattix (7 R                             | <u> </u>            |
| Unit Letter P: feet from the 990 feet from the South line and 990 feet from the East line   |   |                    |  |                     |
| Section 1 Township 23S Range 36E NMPM LEA County  |   |                    |  |                     |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.   |   |                    | )  |                     |
|   |   | <u> </u>           |  |                     |
| 12 Check A  | appropriate Box to Indicate N   | ature of Notice    | Report or Other F                              | Data 7-20-12        |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |                    |  |                     |
| NOTICE OF INTENTION TO: SUE PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR   |   |                    | SSEQUENT REPORT OF:                            |                     |
| <del>-</del>  |   |                    |  | P AND A             |
| PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN  |   |                    |  | _                   |
| DOWNHOLE COMMINGLE  |   |                    |  |                     |
| OTHER:  |   | OTHER: Ready       | for Inspection and rele                        | ease 🗵              |
| 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. |   |                    |  |                     |
|   |   |                    |  |                     |
| This well was plugged on 7/20/2012 and the location has been cleaned and restored.  |   |                    |  |                     |
| Attached are pictures showing location as is.   |   |                    |  |                     |
|   |   |                    |  |                     |
|   |   |                    |  |                     |
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|   |   |                    |  |                     |
|   |   |                    |  |                     |
|   |   |                    | =4   | _                   |
| Spud Date: 10/19/59   | Rig Release Da  | ate: 10/31/59      |  |                     |
| Spud Dute.  |   |                    |  |                     |
|   |   |                    |  |                     |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |   |                    |  |                     |
| $\int_{\mathbb{R}^{n}} dx  dx  dx$  |   |                    |  |                     |
| SIGNATURE Flance / C Wella TITLE Sr. Regulatory Analyst DATE May 6, 2014  |   |                    |  |                     |
| Type or print name  Jeanie McMillan  E-mail address: jmcmillan@enervest.net PHONE: 713.970-1847   |   |                    |  |                     |
| Four State Has Onto   |   |                    |  |                     |
| APPROVED BY: Wah Whitakan TITLE Comp honce Officer DATE 5/13/2014   |   |                    |  |                     |
| APPROVED BY: MAY \$ 2014 Por ocd  |   |                    |  |                     |
|   |   |                    | <del>د.</del> ج                                | <i>"</i>            |