

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

RECEIVED MAY 15 2014

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-05244
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-2433
7. Lease Name or Unit Agreement Name State A
8. Well Number #1
9. OGRID Number 295770
10. Pool name or Wildcat Denton-Devonian

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 FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Resolute Natural Resources Co., LLC	
3. Address of Operator 4000 N. Big Spring, Ste. 500 Midland, TX 79705	
4. Well Location Unit Letter <u>L</u> : 1980 feet from the <u>S</u> line and 660 feet from the <u>W</u> line Section <u>2</u> Township <u>15 S</u> Range <u>37 E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3820 DF	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate ☐ State Nature of Notice, Report or Other Data

NOT
Approved for Plugging of well bore only.
Liability under bond is retained pending receipt of
C-103 (Specifically for Subsequent Report of Well
Plugging) which may be found at OCD web page
under forms/
www.emnrd.state.nm.us/oecd

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☒
CASING/CEMENT JOB ☐
OTHER: ☐

Completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of completion or recompletion. SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion

4/29/14 - Tag existing CIBP @ 9010', tag okayed by Mark Whitaker @ OCD. Circ well w/40sx salt gel, spot 25sx @ 9010'.

4/30/14 - Perf. @ 8065'. Could not pump into perfs @ 8065', pressured up to 1000psi. Spoke w/Mark Whitaker @ OCD, he okayed to spot 30sx cmt. 50' below perfs & tag.

5/1/14 - Tag @ 7800', tag okayed by Mark Whitaker @ OCD. Cut 5 1/2 csg @ 4730'. Csg came free.

5/5/14 - Spot 50sx cmt @ 4780', tag @ 4546', okayed by Mark Whitaker w/OCD. Spot 40sx cmt @ 3177', spot 40sx cmt @ 2235'.

5/6/14 - Tag @ 2100', okayed by Mark Whitaker @ OCD. He also okayed to spot cmt from 406' to surf. w/115sx cmt to surf.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to MOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Wayne R. Brown TITLE General Manager DATE 5-12-14

Type or print name _____ E-mail address: _____ Telephone No. _____

For State Use Only
APPROVED BY: Wayne R. Brown TITLE Dist. Supervisor DATE 7/1/2014
Conditions of Approval (if any): _____

JUL 02 2014