

HOBBS OCD

AUG 05 2014

RECEIVED

Submit 1 Copy To Appropriate District Office  
 District I - (505) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (505) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1000 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 July 18, 2013

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.)		WELL API NO. 30-025-26299
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator K. C. Resources, Inc.		6. State Oil & Gas Lease No. LG-5543
3. Address of Operator P. O. Box 6749, Snowmass Village, CO 81615		7. Lease Name or Unit Agreement Name LEA YH STATE
4. Well Location Unit Letter _____ P _____ : 660 _____ feet from the _____ S _____ line and _____ 660 _____ feet from the _____ E _____ line Section 25 Township 18S Range 34E NMPM County Lea		8. Well Number 2
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3961.4' GL, 3972.4' KB - 11' KB		9. OGRID Number 122912
		10. Pool name or Wildcat Airstrip Bone Springs

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 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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>Return to production</u> <input 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.

12-6-13 - workover operations  
 → Drilled out CIBP @ 9,106'. SN  
 @ 9,517'. RIH w pump & rods  
 Hung on.

returned to production 7-29-14

Spud Date:

No Change

Rig Release Date:

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

SIGNATURE Gary G. Schelling TITLE Production Mgr DATE 8/4/14

Type or print name Gary G. Schelling E-mail address gschelling@nmtel PHONE 970-927-2764  
 For State Use Only river oil co

APPROVED BY: Malcolm Brown TITLE Dist Supervisor DATE 8/5/2014

Conditions of Approval (if any):

AUG 05 2014

dm