

Submit 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 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

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. 30-025-12289
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTOR		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator CHAPARRAL ENERGY, LLC.		6. State Oil & Gas Lease No.
3. Address of Operator 701 CEDAR LAKE BLVD. OKC, OK 73114		7. Lease Name or Unit Agreement Name WEST DOLLARHIDE QUEEN SAND UNIT
4. Well Location Unit Letter J : 1980 feet from the SOUTH line and 1650 feet from the EAST line Section 31 Township 24S Range 38E NMPM LEA County		8. Well Number 35
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3125' DF		9. OGRID Number 004115
		10. Pool name or Wildcat DOLLARHIDE QUEEN

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: H-5	<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.

6/25/2014 - CONDUCTED H-5, TP 1000#, CP 560#, WELL SHUT IN.

HOBBS OCD

JUL 11 2014

RECEIVED

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 Lindsay Reames TITLE ENGINEERING TECH II DATE 7.8.2014

Type or print name LINDSAY REAMES E-mail address: lindsay.reames@chaparralenergy.com PHONE: 405.426.4549

For State Use Only

APPROVED BY: Bill Senanah TITLE Staff Manager DATE 7/18/2014

Conditions of Approval (if any):

AUG 22 2014

