

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6140
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

Form C-103
Revised July 18, 2013

Energy, Minerals and Natural Resources

AUG 19 2014

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

RECEIVED

WELL API NO. 30-025-29766
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 16865
7. Lease Name or Unit Agreement Name TONTO 14 STATE
8. Well Number 3
9. OGRID Number 155615
10. Pool name or Wildcat AIRSTRIPE N; BONE SPRING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4,020' GL

HOBBES OCD
AUG 21 2014

RECEIVED

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 NADEL AND GUSSMAN PERMIAN, L.L.C.	
3. Address of Operator 601 N. MARIENFELD, SUITE 508, MIDLAND, TX 79701	
4. Well Location Unit Letter <u>E</u> : <u>1980</u> feet from the <u>NORTH</u> line and <u>660</u> feet from the <u>WEST</u> line Section <u>14</u> Township <u>18S</u> Range <u>34E</u> NMPM <u>EDDY</u> County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4,020' GL	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

E-PERMITTING PERFORM <u>P&A NR</u> <u>P.M.</u> TEMPORARY <u>INT to P&A</u> PULL OR / <u>CSNG</u> DOWNHOLE <u>TA</u> CLOSED-L <u>TA</u> OTHER: <input type="checkbox"/>	P&A R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> CHG Loc <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

7/31/2014 - PU 265 JTS 2-38" TBG. TAGGED @ 8686'. PUMPED 60 BBLs BRINE SALT GEL PERF @ 6,880'. ATTEMPTED TO PUMP INTO PERFS. SPOKE W/ MARK WHITAKER W/ OCD - INSTRUCTED US TO DROP 50' BELOW PERFS & SPOT A 25 SX CMT PLUG, WOC & TAG. RIH W/ TBG TO 6,930'

8/1/2014 - SPOTTED A 25 SX CMT PLUG @ 6,930'. POOH W/ 30 STANDS. WOC. RIH W/ TBG. TAGGED TOC @ 6,605'. PERF @ 5,820'. LOADED CSG. ATTEMPTED TO PUMP INTO PERFS. SPOKE W/ MARK WHITAKER W/ OCD - INSTRUCTED US TO DROP 50' BELOW PERFS & SPOT A 30 SX CMT PLUG, WOC & TAG PLUG. RIH W/ TBG TO 5,875'

8/2/2014 - SPOTTED A 30 SX CMT PLUG @ 5,615'. RIH CUT CSG @ 3,400'. PUMPED 100 BBLs DOWN 5-1/2" CSG TO CIRC OIL & GAS OUT OF 9-5/8". BUSTED ALL BUT 4 BOLTS ON WH.

8/3/2014 - ND BOP & WH, SPEARED CSG. PULLED UP 90,000# - CSG FREE. NU WH & BOP. LD 78 JTS 5-1/2" CSG. CHANGED EQUIP BACK TO 2-3/8" TBG. RIH W/ TBG TO 3,455'. SPOTTED A 65 SX CMT PLUG. POOH W/ 30 STANDS.

8/4/2014 - RIH W/ TBG. TAGGED TOC @ 3,240'. POOH TO 3,145'. MUD UP W/ 40 BBLs BRINE SALT GEL. SPOTTED A 60 SX CMT PLUG @ 3,245'. POOH W. 30 STANDS. WOC. RIH W/ TBG. TAGGED TOC @ 2,990'. POOH TO 1,960'. SPOTTED A 90 SX CMT PLUG. POOH W/ TBG.

8/5/2014 - RIH W/ TBG/ TAGGED TOC @ 1,720'. POOH TO 450'. SPOTTED A 45 SX CMT PLUG @ 450'. POOH W/ TBG/ WOX. RIH W. TBG. TAGGED TOC @ 320'. RIH W/ 2 JTS TO 60'. SPOT CMT. CURCULATED 35 SX TO SURFACE. DUG OUT & CUT WH & ANCHORS. INSTALLED DRY HOLE MARKER.

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms, www.emnrd.state.nm.us/oed.

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 Sarah Presley TITLE REGULATORY ANALYST DATE 8/14/2014

Type or print name SARAH PRESLEY E-mail address: spresley@naguss.com PHONE: (432) 682-4429

For State Use Only

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 8/25/2014

Conditions of Approval (if any):

AUG 25 2014