

Submit 1 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

RECEIVED
SEP 11 2014

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| 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. 30-025-34703 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> Water Disposal | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator ENERGYQUEST II, LLC | | 6. State Oil & Gas Lease No. NM94864 |
| 3. Address of Operator 4526 RESEARCH FOREST DR., SUITE 200 THE WOODLANDS, TX 77381 | | 7. Lease Name or Unit Agreement Name El Zorro Fremont Federal |
| 4. Well Location Unit Letter G : 1880 feet from the North line and 1350 feet from the East line Section 1 Township 9S Range 36E NMPM Lea County | | 8. Well Number 2 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4039 GL | | 9. OGRID Number |
| | | 10. Pool name or Wildcat Allison Penn |

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

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| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <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 type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Casing Integrity Test <input checked="" 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.

Failed casing integrity test 8/11/14. Casing will not hold pressure.

Spud Date:

07/02/2000

Rig Release Date:

08/12/2000

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

SIGNATURE Debra Moore TITLE Production Analyst DATE 09/10/2014

Type or print name Debra Moore E-mail address: debra.moore@energyquest.us PHONE: 281-875-6200

For State Use Only

APPROVED BY: Bil Seranah TITLE Staff Manager DATE 10/7/2014

Conditions of Approval (if any):

FOR RECORD ONLY

OCT 30 2014