

Submit 1 Copy 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

Form C-103  
October 13, 2009

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

OCT 29 2014

WELL API NO. 30-025-28468
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA-928
7. Lease Name or Unit Agreement Name State NO
8. Well Number 1
9. OGRID Number 246368
10. Pool name or Wildcat SWD Deleware
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

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

OTHER  
☐

OTHER: MIT

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.

Please see attached 2 pages.

- Copy of MIT Chart conducted on 10/24/14 By Bill Sonnamaker passed.
- The Calibration Certificate from Wildcat Measurement Services Inc.

I respectfully submit this for record and started injection also 10/24/14

FOR RECORD ONLY

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 David H. Alvarado TITLE SENM District Fluid Sales Mgr. DATE 10/28/14

Type or print name DAVID H. ALVARADO E-mail address: david.alvarado@basicenergyservices.com PHONE: 575.746.9663  
For State Use Only

APPROVED BY: Bill Sonnamaker TITLE Staff Manager DATE 11/4/2014  
Conditions of Approval (if any):

NOV 05 2014

# *Wildcat Measurement Service, Inc.*

416 East Main Street  
P.O. Box 1836  
Artesia, New Mexico 88211  
Office: (575)746-3481  
Toll Free: 1-888-421-9453

## Calibration Certificate

Company Name: Basic  
Recorder Type: Barton  
Recorder Serial: #265-2121108

Recorder Pressure Range: 0-1000# Accuracy +/-: 0.2% PSIG  
Temperature Range: \_\_\_\_\_ Deg F.

Increasing Pressure			Decreasing Pressure		
Applied Pressure	Indicated Pressure	Error%	Applied Pressure	Indicated Pressure	Error%
0.0#	0.0#	0	800#	800#	0
100#	100#	0	600#	600#	0
300#	300#	0	400#	400#	0
500#	500#	0	200#	200#	0
700#	700#	0	0.0#	0.0#	0
1000#	1000#	0			

Temperature Test		
Applied Temperature	Indicated Temperature	Error%

**FOR RECORD ONLY**

Certified Calibration Instrument Used
Gauge: <u>Crystal</u>
Deadweight: _____

*BS 11/4/2014*

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Calibration Date: 04/29/2014

Technician: *Justin Gillette* Justin Gillette

7

8

9

10

11

NOON

1

2

3

4

5

6 PM

7

8

9

10

11

MIDNIGHT

1

2

3

4

5

6 AM



Graphic Controls LLC

CHART NO. MC MP-1000

TAKEN OFF

METER

CHART PUT ON

LOCATION

REMARKS

10/24/2014

BS 11/4/2014

FOR RECORD ONLY

Basic Energy Services  
State N.O. #1 SWB  
Sec 7 T19S R30E  
API 30-025-28468  
Start 525  
Final 475  
Time 32 min

Bill Bernamiah  
Och

Basic  
1000 #  
60 min  
Cal 4-39-14