

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

HOBBS OCD

WELL API NO. 30-005-105610
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> FPD <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name CSD
8. Well Number 87
9. OGRID Number
10. Pool name or Wildcat CWAU

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 ☒ Gas Well ☒ Other ☐
2. Name of Operator
Cano Petroleum of New Mexico
3. Address of Operator
823 S. Detroit Tulsa, OK 74120
4. Well Location
Unit Letter: 1980 feet from the N line and 660 feet from the W line
Section 14 Township 8S Range 30E NMPM County CHAVEZ
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:		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: MPT <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.

Pressured up to #380 for 32 minutes
Starting Pressure #380 Ending Pressure #385

Spud Date:

Rig Release Date:

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

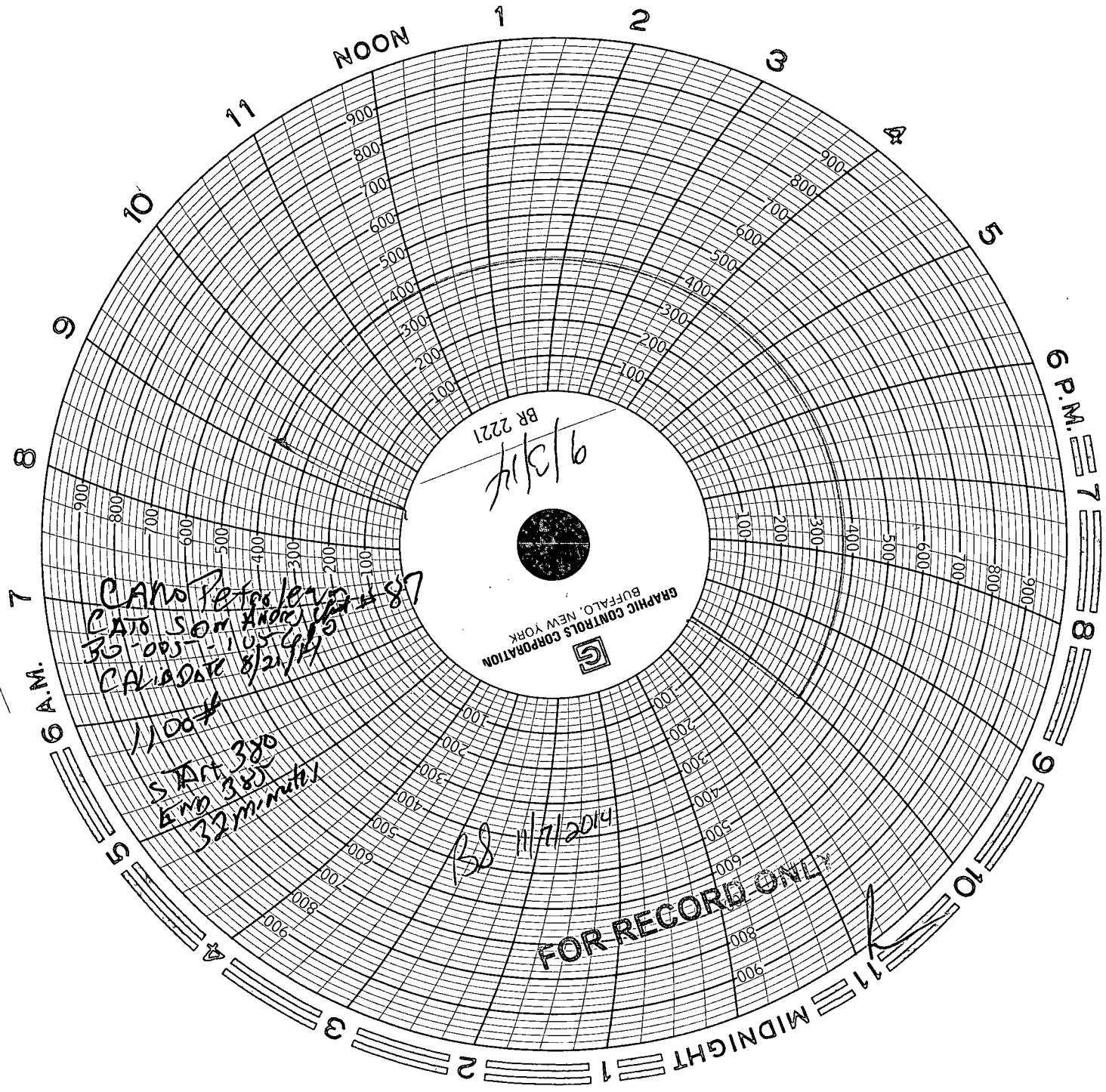
SIGNATURE: Robert McKenzie TITLE: Sr. Field Operations mgr. DATE: 9/13/14
Type or print name: Robert McKenzie E-mail address: robert.mckenzie@dbt-services.com PHONE: 432-425-3100

For State Use Only

APPROVED BY: Bill Sorenson TITLE: Staff Manager DATE: 11/7/2014
Conditions of Approval (if any):

FOR RECORD ONLY

NOV 12 2014



9/3/14
BR 2221

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK



CANON Petroler #87
CATO SON ANDERSON
BG-005-1056
CAL DATE 8/21/14

1100#
START 380
END 385
32 min. 1

BS 11/11/2014

FOR RECORD ONLY