Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
District I = (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283		WELL API NO. 30 - 005-20361
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE   FEE   FED
District IV - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
PROPOSALS.)	CATION FOR PERMIT" (FORM C-10) FOR STATE OF	rederal 28 -
1. Type of Well: Oil Well	Gas Well Other	8. Well Number OO
2. Name of Operator	JAN 2 3 2015	9. OGRID Number
Tandem Energy Corporation		236183
3. Address of Operator 2700 Post Oak Blvd. Ste. 1000, Ho	ouston, TX 77056	10. Pool name or Wildcat
4. Well Location	buston, 1X 77036 RECEMED	1 Vest Kanch
Unit Letter G: 1980 feet from the North line and 1980 feet from the EAST line		
Section 28 Township 145 Range 30E NMPM County Chavez		
Section	11. Elevation (Show whether DR, RKB, RT, GR,	
	389668	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	•	JBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL W	<u> </u>
TEMPORARILY ABANDON X CHANGE PLANS COMMENCE DRILLING OPNS. P AND A DULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEM	EN1 JOB LJ
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
OTHER:	OTHER:	П
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.		
Tandem respectfully request to temporarily Abandon this well,		
TANGEM respectfully request to remporarily abundon this well,		
•	•	
. OM		
		DECORD ONLY All Fordered
	•	RECORD ONLY. All Federal
	forms	require <u>BLM APPROVAL.</u>
<u> </u>		
Spud Date:	Rig Release Date:	
<u> </u>		<u></u>
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
A A	<b>A</b> .	
SIGNATURE A TAN	CLOUTH TITLE Regulatory Specialis	t DATE 12/02/2014
SIGNATURE X, M	THE REGulatory Specialis	DATE 12/02/2014
Type or print name L. Kiki Lock	ett E-mail address: kikil@t5e	nergy.com PHONE: 713-987-7326
For State Use Only		
APPROVED BY: Accepted for Record Only DATE		
Conditions of Approval (if any):  MNA 1/214/2015		

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