

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

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

Form C-103  
Revised July 18, 2013

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-09806
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator OILFIELD WATER LOGISTICS		6. State Oil & Gas Lease No.
3. Address of Operator 8214 WESTCHESTER DRIVE, SUITE 850, DALLAS, TX. 75225		7. Lease Name or Unit Agreement Name MARLO SHOLES B
4. Well Location Unit Letter P: 660 feet from the SOUTH line and 660 feet from the EAST line Section 25 Township 25S Range 36E NMPM County LEA		8. Well Number #002
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 308339
		10. Pool name or Wildcat

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 checked="" 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: <input 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.

10-14-2014, MIRU UNSET PACKER, INSTALL BOP, POOH WITH 87 JTS OF 3 1/2' IPC TBG. AND PACKER.  
RIH WITH DRILL COLLARS AND TBG, CLEAN OUT TO TD 3055', POOH  
10-15-2014, RIH W/PACKER AND TBG. SET PACKER @ 2849' ACIDIZE WITH 2000 GALS OF 15 % HCL ACID  
UNSET PACKER POOH, LAID DOWN 3 1/2' TBG. S/I  
10-16-2015, RIH W/7" AS IX NICKEL PLATED PACKER, (2.81 F) ON/OFF TOOL, AND 66 JTS OF 4 1/4 IPC CSG.  
PRODUCTION PIPE. CIRCULATE PACKER FLUID, SET PACKER @ 2849' (86' ON TOP OF TOP PERFS)  
TEST CSG TO 500# FOR 30 MIN. HELD OK.  
10-17-2015, PERFORM A 30 MIN. MIT TEST TO 350#, WITNESS BY OCD OFFICER, TEST PASS OK, RIG DOWN MOVED  
OUT, CLEAN LOCATION.

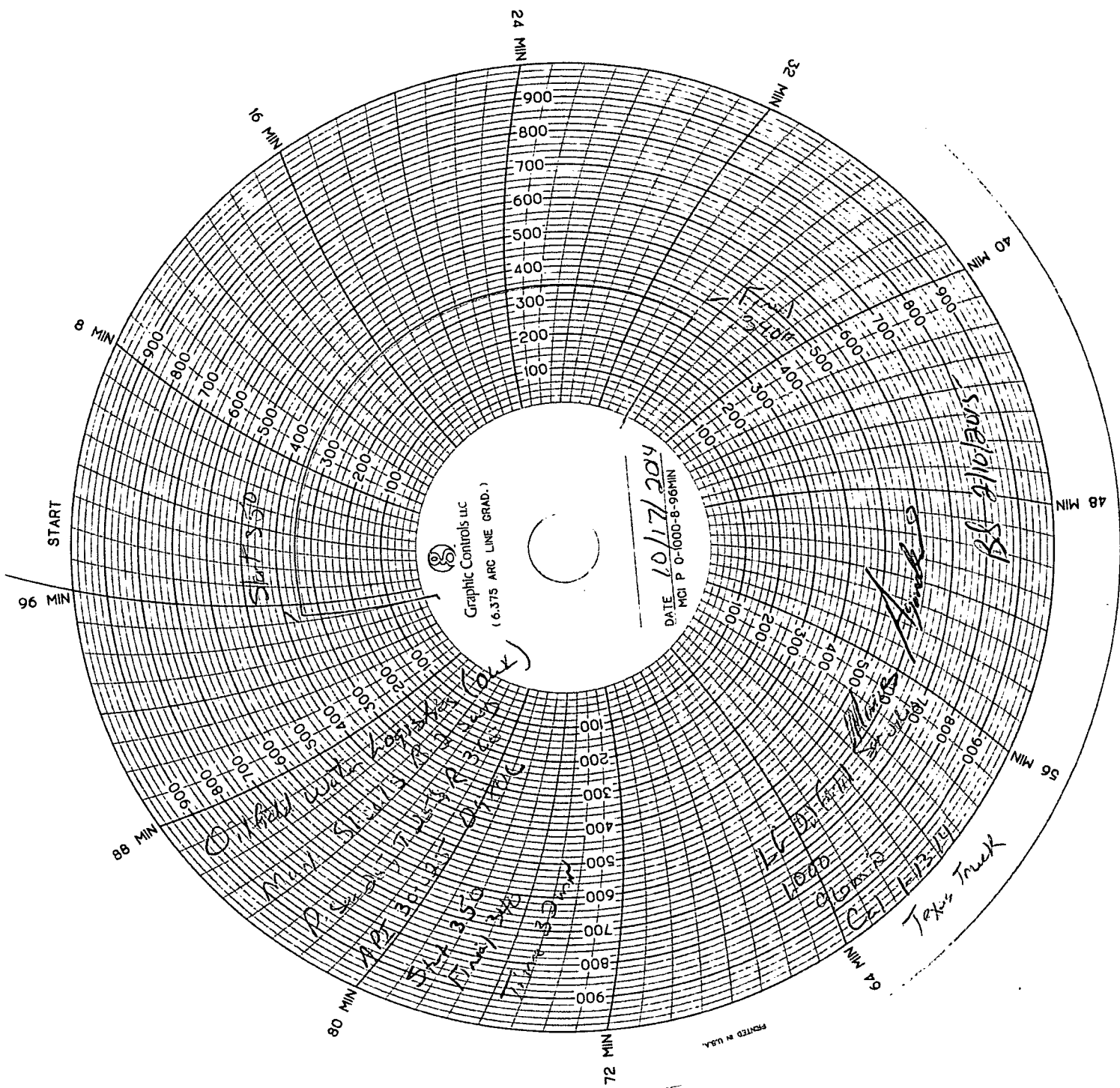
Spud Date:  Rig Release Date:

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

SIGNATURE Katy Weller TITLE Landman DATE 1/29/2013  
Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
For State Use Only

APPROVED BY: Bill Semanah TITLE Staff Manager DATE 2/10/2015  
Conditions of Approval (if any):

FEB 11 2015



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