

MAY 26 2015

Minerals and Natural Resources

Revised August 1, 2011

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-025-07145
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Resolute Natural Resources Co., LLC		6. State Oil & Gas Lease No.
3. Address of Operator 1675 Broadway, Ste 1950, Denver, CO 80202		7. Lease Name or Unit Agreement Name Continental Wallace
4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>south</u> line and <u>2310</u> feet from the <u>west</u> line Section <u>06</u> Township <u>12S</u> Range <u>38E</u> NMPM <u>6</u> County <u>Lea</u>		8. Well Number <u>01</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3875 GL		9. OGRID Number 295770
10. Pool name or Wildcat Devonian		

**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 and bradenhead test ☒

**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.

Resolute conducted a Mechanical Integrity Test and a bradenhead test on the subject well on May 21, 2015. See attached.

Spud Date:

Rig Release Date:

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

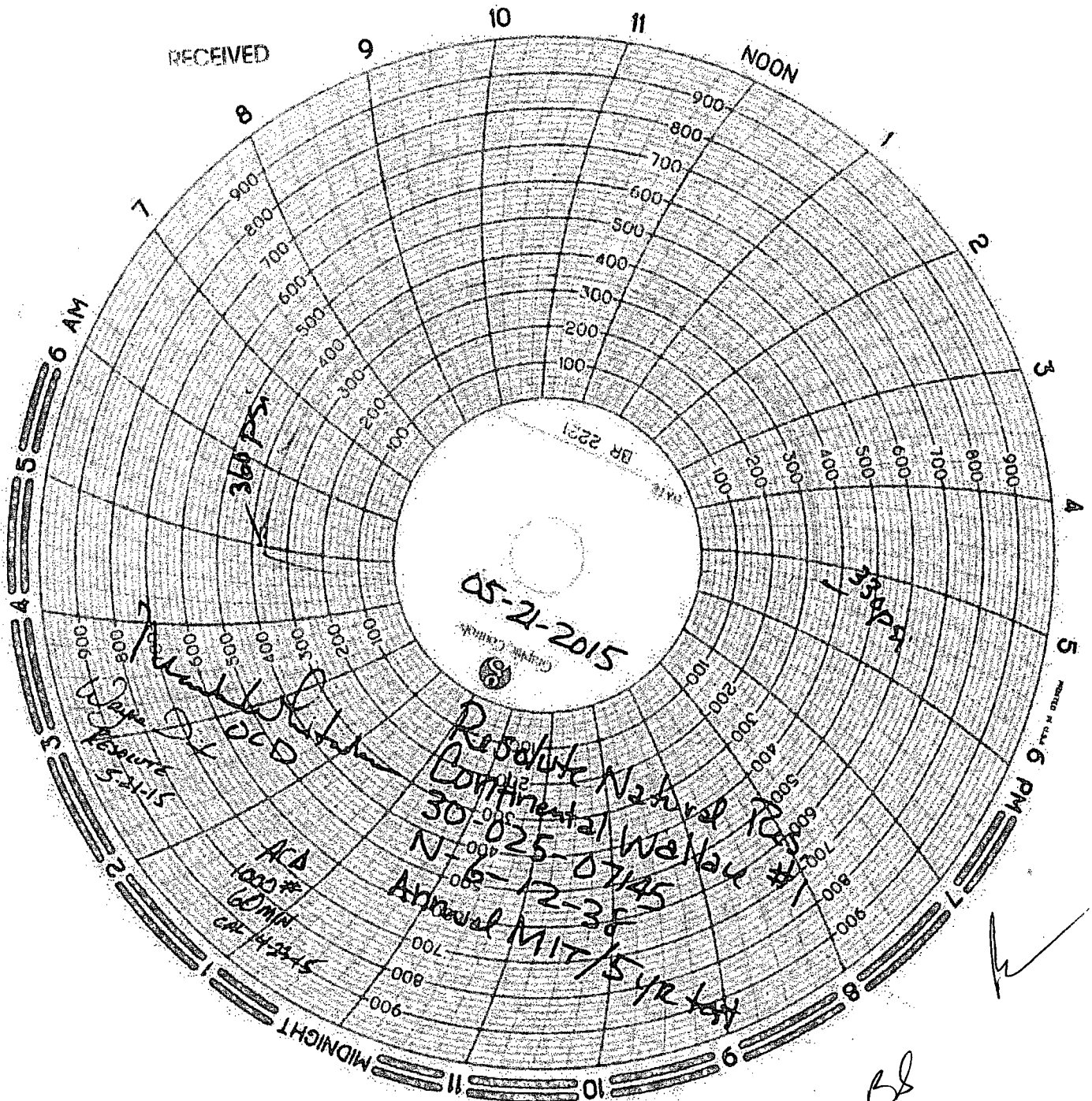
SIGNATURE Sherry Glass TITLE Sr Regulatory Analyst DATE 5-22-13  
Sherry Glass sglass@resoluteenergy.com 303-573-4886  
 Type or print name E-mail address: PHONE: X1580  
**For State Use Only**

APPROVED BY: Bill Samanah TITLE Staff Manager DATE 5/26/2015  
 Conditions of Approval (if any):

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