

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

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.)		WELL API NO. 30-041-20959
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ARMSTRONG ENERGY CORPORATION		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 1973, Roswell, NM 88022-1973		7. Lease Name or Unit Agreement Name Pep 36 State
4. Well Location Unit Letter M : 990 feet from the South line and 430 feet from the West line Section 36 Township 5S Range 33E NMPM Roosevelt County		8. Well Number 3
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 1092
		10. Pool name or Wildcat Wildcat: Wolfcamp

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

E-PERMITTING <SWD INJECTION> CONVERSION RETURN TO CSNG INT TO PA	INJECTION RBDMS TA CHG LOC P&A NR P&A R	SUBSEQUENT REPORT OF: REMEDIAL WORK COMMENCE DRILLING OPNS. CASING/CEMENT JOB OTHER:	ALTERING CASING P AND A OTHER:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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.

06-09-15 TIH, tag CIBP w/ cement @ 7206', CIBP @ 7250', 44' cement. Circ hole w/ mud from 7206', POH to 6595', spot 25 sx cement, POH to 4888', spot 25 sx cement.

06-10-15 POH, perf @ 3252', TIH w/ pkr, squeeze w/ 50 sx cement w/ CaCl<sub>2</sub>, WOC. TIH, tag @ 3112', 140' plug. POH, perf @ 2500', squeeze w/ 50 sx cement w/ 2% CaCl<sub>2</sub>.

06-11-15 TIH, tag @ 2296', 204' plug, perf @ 1800', squeeze w/ 40 sx cement w/ CaCl<sub>2</sub>, WOC. Tag @ 1578', 222' plug. Omitted plug @ 500', OCD approved. Perf @ 100', circ cement to Surface, inside/outside, 30 sx cement. Cut off wellhead, install Dry Hole marker, cut off anchors.

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 B. A. Stubbs TITLE Vice President - Operations/Engineering DATE 06/30/15  
Type or print name Bruce A. Stubbs E-mail address: bastubbs@armstrongenergycorp.com PHONE: 575-625-2222

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APPROVED BY: Malay Brown TITLE Dist. Supervisor DATE 7/2/2015  
Conditions of Approval (if any):

JUL 07 2015

dm