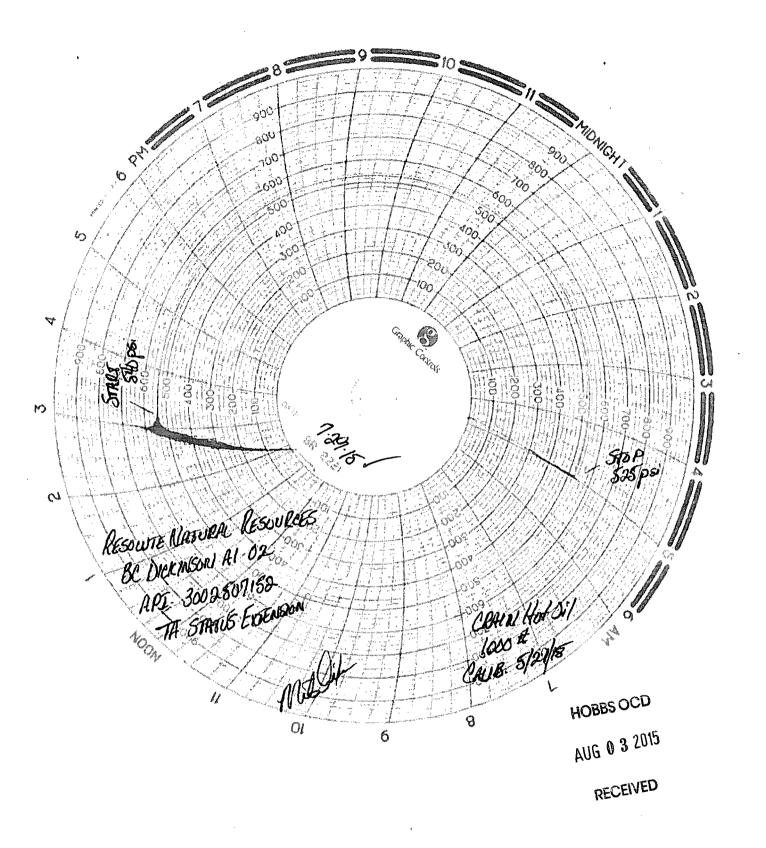
	MENDED Form C-103 Revised July 18, 2013			
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.			
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 AUG O OLDEONSERVATION DIVISION	30-025-09868 5. Indicate Type of Lease			
District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 1000 Rio Brazos Rd., Aztec, NM 87410	STATE FEE			
District IV – (505) 476-3460 I220 S. St. Francis Dr., Santa Fe, NM 87505 RECEIVED Santa Fe, NM 87505	6. State Oil & Gas Lease No.			
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name			
(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.)	B. C. Dickinson A1			
1. Type of Well: Oil Well X     Gas Well Other       2. Name of Operator	8. Well Number 2 9. OGRID Number			
Resolute Natural Resources Co., LLC Y	295770			
3. Address of Operator 1700 Lincoln St, Ste 2800 Denver, CO 80203	10. Pool name or Wildcat Denton, Devonian			
4. Well Location Unit Letter L : 2240 feet from the SOUTH line and 40	00 forther West the			
Section 1 Township 15S Range 37E	00     feet from the West     line       NMPM     County Lea			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3808' GL				
12. Check Appropriate Box to Indicate Nature of Notice,	Report or Other Data			
E-PERMITTING <swd injection=""> SUB</swd>	SEQUENT REPORT OF:			
CONVERSION RBDMS (AD) C REMEDIAL WORK	K 🔲 ALTERING CASING 🗌			
CSNG CHG LOC				
INT TO PAP&A NRP&A R OTHER: MIT	for TA status 🛛 🔊			
<ol> <li>Describe proposed or completed operations. (Clearly state all pertinent details, and of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Cor proposed completion or recompletion.</li> </ol>				
Resolute ran a MIT on the subject well or	n July 29, 2015, to			
preserve the continued TA status for annu	ual test. Chart and			
bradenhead test are attached.				
KETUEN WELL TOTION This Approval of				
	Expires10/29/20/5			
ORP/A. WAB	3 MONTHS !			
Spud Date: Rig Release Date:				
I hereby certify that the information above is true and complete to the best of my knowledge	e and belief.			
SIGNATURE A MUMAY Aluna TITLE ST Regulator	y Analystate 7-30-15			
	nergy. com PHONE: 303-573-4886, 15			
Type or print name E-mail address:				
APPROVED BY: Alex Dian Pitte Dist Supe Conditions of Approval (if any):	WISQUDATE 8/3/2015			
U	h -			
No PROD REPORTED 3	34 MONTHS.			

PROD REPORTED	331 MOUTH	h			
	AUG	0	Ą	2015	MB



q = 1