Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
District I Energy, Minerals and Natural Resour	rces May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISIO	ON 30-025-42337
District III 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505	STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	6. State Off & Gas Lease No.
87505 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	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	0 W-II N
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other	8. Well Number
2 Name of Operator	0 OGPID Number
Texland Petroleum-Hobbs, LLC	113315
3. Address of Operator	10. Pool name or Wildcat
777 Main Street, Suite 3200, Fort Worth, Texas 76020 RECEIVED	Shoe Bar, Wolfcamp, South
4. Well Location	Shoe Bar, woncamp, South
D 400	
Section 8 Township 17S Range	36E NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3672' GR	
Pit or Below-grade Tank Application or Closure	
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water	
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material	
Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIA	
The state of the s	ICE DRILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
OTHER: Frac well xx OTHER:	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
of recompletion.	
Texland Petroleum-Hobbs request approval to fracture stimulate perfs 10,886 – 10,932' (oa)	
rexiand retroleum-motos request approvar to macture stillula	ate peris 10,880 – 10,932 (0a)
Wellbore Schematic is attached.	
wellbore Schematic is attached.	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .	
	and an antached) and hard to CD-approved plan
SIGNATURE Vekie Smith TITLE Regulatory	Analyst DATE0 10/19/15
Type or print name Vickie Smith E-mail address: vsmith@te	expetro.com Telephone No. 575-433-8395
For State Use Only	
APPROVED BY	m Engineer DATE 10/21/6
APPROVED BY:	DATE /UTAILS
Constitution of Approvin (in only).	

OCT 2 1 2015



