

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

WELL API NO. 30-005-10490
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. OG-1195
7. Lease Name or Unit Agreement Name HALEY SAN ANDRES UNIT
8. Well Number #35
9. OGRID Number 164557
10. Pool name or Wildcat CHAUVEROO; SAN ANDRES

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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other (INJECTOR) <input type="checkbox"/> <b>HOBBS OCD</b>	
2. Name of Operator RIDGWAY ARIZONA OIL CORP	
3. Address of Operator 777 N. ELDRIDGE PARKWAY, SUITE 150, HOUSTON, TX 77079	
4. Well Location Unit Letter <u>F</u> : 1980 feet from the <u>NORTH</u> line and 1980 feet from the <u>WEST</u> line Section <u>3</u> Township <u>8S</u> Range <u>33E</u> NMPM County <u>ROOSEVELT</u> <b>Chaves</b>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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 specific 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.

WELL WILL NOT PASS MIT. INTEND TO REPAIR WELL.

- RU, POOH WITH TUBING & EXISTING PACKER.
- RIH WITH BIT & SCRAPER TO BOTTOM & CLEAN OUT FILL
- RIH W/PACKER & PLUG. TEST CASING. IF CASING NEEDS REPAIR, LOCATE HOLE & SQUEEZE. DRILL OUT CEMENT.
- RIH WITH 2 3/8" TUBING AND PACKER. SET PACKER AT APPROXIMATELY 4135'
- TEST ANNULUS TO 500 PSI. NIPPLE UP WELL HEAD. RDMO
- CONTACT OCD TO WITNESS MIT AND T/A WELL

IF WELL REMAINS INCAPABLE OF PASSING MIT, A DECISION WILL BE MADE TO EITHER SLIM HOLE OR P&A WELL

Spud Date:

Rig Release Date:

Condition of Approval: notify  
Condition of Approval: notify  
OCD Hobbs office 24 hours  
OCD Hobbs office 24 hours  
Prior of running MIT Test & Chart

SIGNATURE JAMIE HOGUE TITLE: VP REGULATORY AFFAIRS DATE 10-6-2015

Type or print name JAMIE HOGUE E-mail address: jhogue@enhancedoilres.com PHONE: 832-485-8522

For State Use Only

APPROVED BY: Maley Brown TITLE: Dist Supervisor DATE: 10/26/2015

Conditions of Approval (if any):

57 MONTHS - NO PROD REPORTED

OCT 27 2015