

Submit L 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. 30-025-25059
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-936
7. Lease Name or Unit Agreement Name NVANU "10"
8. Well Number 1
9. OGRID Number
10. Pool name or Wildcat North Vacuum ABO
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4046.8' GL

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other (Inj) ☐

2. Name of Operator  
Lime Rock Resources II-A, LP

3. Address of Operator 1111 Bagby St., Ste. 4600  
Houston, TX 77002

4. Well Location  
Unit Letter D : 860 feet from the N line and 660 feet from the W line  
Section 1 Township 17S Range 34E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4046.8' GL

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 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.

POH w/existing leaking production packer, replace w/permanent latch-in packer, pressure test w/chart recorder & return to injection. Project will start, as soon as possible, upon approval of this C-103.

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

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 Carla Martin TITLE Regulatory Technician DATE 10/26/15

Type or print name Carla Martin E-mail address: cmartin@limerockresources.com PHONE: 713/292-9510

**For State Use Only**

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 10/27/2015

Conditions of Approval (if any):

OCT 28 2015