Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION	30-025-42258
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Francis DOBBS OCC	Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa re, NW 87505	6. State Oil & Gas Lease No. NMNM110836
87505		
	CICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name PADUCA FED, SWD
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well  Other Injection well	8. Well Number 3Y
Type of Well: Oil Well     Name of Operator	Gas Well  Other Injection well	9. OGRID Number
MESQUITE SWD, INC.		7. OGRID Number
Address of Operator     PO BOX 1479 CARLSBAD NM	88221	10. Pool name or Wildeat SWD, DELAWARE BELL CHERRY
4. Well Location		
Unit Letter	:2310feet from theNline and!	1760feet from theWline
Section 23	Township 25S Range 32E	NMPM County LEA
	11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
	3429 GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF I	NTENTION TO: SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK		
TEMPORARILY ABANDON	CHANGE PLANS   COMMENCE DRIE	
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMENT	JOB 🗆
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM		
OTHER:	Diller: TRACEI	The second secon
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.		
11-10-2015, MESQUITE SWD, PERFOMORED A PUMP IN TRACER SURVEY. CARDINAL SURVEYS PERFOMRED THE SURVEY		
SORVET		
Spud Date:	Rig Release Date:	
Second Control of the		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
San HA		
SIGNATURE TITLE: PRODUCTION FOREMAN DATE 11/30/15		
Type or print name RILEY NEATHELRLIN_ E-mail address: RGNEATHERLIN@GMAIL.COM_ PHONE: 575-706-7288		
E - Ct - t - II - O - L	pted for Record Only DEC 11	2015