

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

RECEIVED

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.)		WELL API NO. 30-025-25341
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> Injection well		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator SOGO III LLC		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 210, Midland, TX 79702		7. Lease Name or Unit Agreement Name SFPRR
4. Well Location Unit Letter <u>I</u> : <u>1980</u> feet from the <u>S</u> line and <u>660</u> feet from the <u>E</u> line Section <u>28</u> Township <u>9S</u> Range <u>37E</u> NMPM County <u>Lea</u>		8. Well Number <u>18</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 3964'		9. OGRID Number <u>309220</u>
		10. Pool name or Wildcat Sawyer; San Andres, West

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: Pressure Test ☒

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.

Ran pressure test 11/30/15. Witnessed by George Bower. Bradenhead Test Report and chart attached.

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

Tammy Kennedy

TITLE: Regulatory Administrator

DATE: 12/14/2015

Type or print name Tammy Kennedy

E-mail address: tkennedy@stanolind.com

PHONE: 432-640-0033

For State Use Only

APPROVED BY:

Beckman

TITLE

Staff Manager

DATE

1/5/16

Conditions of Approval (if any):

JAN 05 2016

PRINTED IN U.S.A.



DATE 11/30/15
BR 2221

SOGO III
SFPRR #18
30-025-25341
I-28-95-376
1000#
5100#
4100#
30
end

RECEIVED
DEC 2 2015
HOBBS OGD
Candy

B8
11/5/16