

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. <u>30-025-00367</u>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <u>B-9683</u>
7. Lease Name or Unit Agreement Name <u>Anderson Ranch unit</u>
8. Well Number <u>17</u>
9. OGRID Number <u>155471</u>
10. Pool name or Wildcat <u>Anderson Ranch Wolfcamp</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>4302 GR</u>

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 ☐ Gas Well ☒ Other TA'd

2. Name of Operator  
Grand Banks Energy Company

3. Address of Operator  
10 Denta Drive, Suite 300 E Midland, TX 79705

4. Well Location  
Unit Letter R : 1980 feet from the South line and 1980 feet from the East line  
Section 2 Township 16S Range 30E NMPM 16A County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4302 GR

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>MIT on TA'd well</u> <input checked="" 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.

Pressured up to 5600 psi. Test run 12-17-15.  
Plan to re-enter this well and use for San Andres development in 2016.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

G-13

SIGNATURE Denise Jones TITLE Regulatory Analyst DATE 12-22-15

Type or print name Denise Jones E-mail address: djones@cambridgemanagement.com PHONE: 432-620-9181

For State Use Only

APPROVED BY: Bep Semanah TITLE Staff Manager DATE 1/13/16

Conditions of Approval (if any):

JAN 13 2016

OK



