State of New Mexico			Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVAT	TION DIVISION	20.005.60570
District III - (505) 334-6178 1220 Sout		th St. Francis Dr.	30-005-60579 5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, N	M 87505	STATE FEE X
1220 S. St. Francis Dr., Santa Fe, NM			6. State Oil & Gas Lease No.
87505	ACTOR AND DEPOSITE OF THE		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLI			Twin Lakes San Andres Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well OtherInjection		8. Well Number 4	
2. Name of Operator	Gas wen OtherInjection		9. OGRID Number
State of New Mexico formerly Car	nyon E&P Company	FEB 2 9 2016	9. OGRID Number
3. Address of Operator			10. Pool name or Wildcat
811 South 1st Street Artesia, NN	A 88210	RECEIVED	Twin Lakes; San Andres (Assoc)
4. Well Location			,
Unit LetterI:	1650feet from the	South line and	330feet from theEastline
Section 25	Township 8S	Range 28E	NMPM Chaves County
Carlotten Carlotten Lagran and Carlotten Carlotten	11. Elevation (Show whether	er DR, RKB, RT, GR, etc.,	
12 Cheels Assessment Dente Indiana No. CN ci. D. Col. D.			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON PAND A XX			
PULL OR ALTER CASING CASING/CEMENT JOB			
DOWNHOLE COMMINGLE	10/11/		
OTHER:		OTHER:	
13. Describe proposed or comp	oleted operations. (Clearly stat	e all pertinent details, and	d 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.			
SEE ATTACHED			
SEL AT IACILED			
I hereby certify that the information	above is true and complete to	the best of my knowledge	and helief
Thereby certify that the information	above is true and complete to	the best of my knowledge	and benefit.
SIGNATURE	TITLE_		DATE
Type or print name	E-mail ac	ldress:	PHONE:
For State Use Only			
h. C.	MI D	L Lan Burn	Specialist DATE 02/29/2016
APPROVED BY:	TITLE !	Tholeum ingh.	Pecalist DATE 02/27/2016
Conditions of Approval (if any):		•	

Plugging Report TLSA #4

2/22/2016 Moved equipment and rig and rigged up. Had to work packer free. Changed out damaged well head. Installed BOP and POOH with 81 jts 2 3/8" tubing. Packer swabbed all the way out of the well. SION

2/23/2016 RIH and set 5 ½" CIBP @ 2550'. Circulated MLF and tested casing. Casing good. Spotted 55 sx cement on top of CIBP. POOH and perforated casing @ 1000'. Set packer at 632' and squeezed perfs with 35 sx cement. SION

2/24/2016 RIH and tagged at 863'. Laid down remaining pipe and perforated casing at 171'. Established rate and pumped cement down 5 ½" casing and up annulus to surface. Took 55 sx. Rigged down cut off well head. Good cement to surface. Installed marker and cut off anchors. Cleaned the pit and cleared location.