Submit 1 Copy To Appropriate District Office State of New Minerals and New		Form C-103 Revised July 18, 2013
District I – (575) 393-6161 Energy, Minerals and Natural Resources District II – (575) 745 1938 BB330 OCD OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210		WELL API NO. 30-025-26752
		5. Indicate Type of Lease
District III - (505) 334-6178 1000 Rio Brazos Rd., Azter FM 276 02016 District IV - (505) 476-3460 Santa Fe, NM 8		STATE X FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 8 Santa Fe, NM	57303	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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		Maralo 16 State
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other		8. Well Number 8
Name of Operator RMR Operating, LLC	-	9. OGRID Number 281085
3. Address of Operator		10. Pool name or Wildcat
14282 Gillis Road, Farmers Branch, TX 75244		Sioux; Tansil-Yates-Seven Rivers
4. Well Location Unit Letter K: 1980 feet from the South line and 1980 feet from the West line		
Offic Detter . 1000 leet from the	line and 198 lange 36E	0 feet from the West line NMPM County Lea
11. Elevation (Show whether Di		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB		
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
OTHER:	OTHER:	
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.		
RMR Operating LLC is seeking permission to run an MIT test.		
RMR plans to test the casing to 540 psig for 30 minutes.		
RMR would like to apply for a one year extension to		
T.A. the subject well.	Cor	ndition of Approval: notify
		CD Hobbs office 24 hours
	nrior	of running MIT Test & Chart
Spud Date: Rig Release D	Pate: Prior	or running will rest & Chart
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Rom Person TITLE V.P. Operations DATE 9/19/16		
Type or print name Rais Pearson E-mail address: ross @ redonountain PHONE: 214-871-0400 For State Use Only		
APPROVED BY: Maly ABrown TITLE Dist. Supervisor DATE 9/29/2016 Conditions of Approval (if any):		

NO PROD REPORTED-174 MONTHS