

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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

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. 30-025-27616
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator MESQUITE SWD, INC.		6. State Oil & Gas Lease No. SWD-1234 LC063200
3. Address of Operator PO BOX 1479, CARLSBAD NM, 88221		7. Lease Name or Unit Agreement Name PADUCA
4. Well Location Unit Letter <u>H</u> : 1980 feet from the <u>N</u> line and <u>660</u> feet from the <u>E</u> line Section <u>22</u> Township <u>25S</u> Range <u>32E</u> NMPM County <u>LEA</u>		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3409 GR		9. OGRID Number 161968
		10. Pool name or Wildcat

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

3/19/16- MOVED IN PULLING UNIT, R/U

3/21/16- KILLED WELL WITH BRINE, NIPPLED UP BOP, TOH WITH PRODUCTION TUBING, RIH W/WORK STRING, BIT AND SCRAPER, CLEAN OUT TO TD, LD WORK STRING

3/22/16- TIH W/ PRODUCTION STRING AND PACKER, SET PACKER @ 4700', CIRCULATED PACKER FLUID, FLANGED UP WELL HEAD, RELEASED RIG.

3/29/16- NOTIFIED OCD OF MIT, SPOKE WITH BILL SONNAMAKER, INITAIL PSI 710#'S FINAL PSI 710#'S HELD FOR 35 MINUTES, NO WITNESS, SEE ATTACHEMENT FOR CHART CALIBRATION

Spud Date:

3/19/16

Rig Release Date:

3/22/16

OK
GMB

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

SIGNATURE

TITLE

Production Foreman

DATE

3/29/16

Type or print name: RILEY G NEATHERLIN E-mail address: RGNEATHERLIN@GMAIL.COM PHONE: 575-706-7288
For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

- 510
- 700
- 1000
- 200
- 0

Remarks

HOBBS OCD

APR 1 2016

RECEIVED