

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

HOBBS
OCD
JAN 03 2017
RECEIVED

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

WELL API NO. 30-025-27616
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> ALFED
6. State Oil & Gas Lease No. SWD-1234
7. Lease Name or Unit Agreement Name PADUCA SWD
8. Well Number 1
9. OGRID Number 161968
10. Pool name or Wildcat SWD;BELL CANYON-CHERRY CANYON
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3409 GR

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD
2. Name of Operator MESQUITE SWD, INC
3. Address of Operator PO BOX 1479, CARLSBAD NM, 88220
4. Well Location Unit Letter H : 1980 feet from the N line and 660 feet from the E line Section 22 Township 25S Range 32E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3409 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 checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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.

MESQUITE SWD PLANS TO MOVE IN A PULLING UNIT TO PERFORM REMEDIAL WORK ON THE WELL, PRESSURE ON THE BACKSIDE. WE INTEND TO TOH WITH TUBING AND PACKER, SERVICE PACKER, AND THEN TIH WITH INJECTION TUBING AND PACKER. CIRCULATE WITH PACKER FLUID, TEST TO 500#S AND FLANGE UP THE WELL HEAD.

ESTIMATED TIME OF WORK: 2 DAYS

WORK TO BEGIN 1/4/17

MOVE IN PULLING UNIT AND RIG UP 1/3/17

**Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart**

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 Riley Neatherlin TITLE Production Foreman DATE January 3, 2017

Type or print name Riley Neatherlin E-mail address: RGNEATHERLIN@GMAIL.COM PHONE: 575-706-7288

For State Use Only

APPROVED BY: Mary Brown TITLE AO/II DATE 1/3/2017

Conditions of Approval (if any):

MB