Office	by To Appropriate District		State of New M		Form C-1	
	75) 393-6161	Energy,	, Minerals and Na	tural Resources	Revised July 18, 20)13
1625 N. Fren	ch Dr., Hobbs, NM 88240				WELL API NO.	
District II - (575) 748-1283 S11 S. First St. Arlesia, NM 88210 OIL CONSERVATION DIVISION						
	811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1220 South St. Francis Dr.				5. Indicate Type of Lease	
1000 Rio Bra	1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505				STATE FEE	
	(505) 476-3460		Santa Fe, Nivi	8/303	6. State Oil & Gas Lease No.	
87505	rancis Dr., Santa Fe, NM					
0,700	SUNDRY NOT	TICES AND RE	EPORTS ON WELL	₄ S	7. Lease Name or Unit Agreement Name	e-
(DO NOT US	SE THIS FORM FOR PROP				DAGGER STATE COM	
	RESERVOIR, USE "APPL	JCATION FOR PE	RMIT" (FORM C-101)	FOR SUCH		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other					8. Well Number-701H	
2. Name of Operator					9. OGRID Number - 000785	
	NERGY INC.				9. OGRID Number - 000783	
	s of Operator				10. Pool name or Wildcat	
	3418, MIDLAND, TEX	YAS 70702			WC-025 G-10 S2133270; WOLFCAME)
		AAG 19102			WC-023 G-10 B2133270, WOLF CANA	
4. Well Lo						
1	nit Letter H: 2610 feet			-		
Se	ection: 30 Township		lange: 33E		County: LEA	OR OF SA
			n (Show whether D	R, RKB, RT, GR, etc.)		
N. 61 (1987)		3782.9'				
	12. Check A	Appropriate B	ox to Indicate N	lature of Notice, R	Report or Other Data	
	NOTICE OF IN	NTENTION .	TO:	SUBS	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK						
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRII				LING OPNS. ☐ P AND A [
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT J					JOB	
DOWNHO	LE COMMINGLE]				
CLOSED-L	OOP SYSTEM]				
OTHER: 9	5/8ths Annular Casing	- Packer Setting I	Depth 🛛	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.						
	1	•				
The well plan	for circulating cement	to surface for th	ne 9 5/8ths Intermed	liate Casing shall be t	o have an annulus casing packer (ACP) so	t
below the base of the salt zone at 3,700' +/ The DV tool will then be placed directly above the ACP.						
		700000000000000000000000000000000000000				
	TBD					
Spud Date:	TBD		Rig Release Da	nte:		
Spud Date:	TBD		Rig Release De	nte:		
					,	_
	TBD	above is true an			and belief.	_
		above is true and			and belief.	_
I hereby certif		above is true and	d complete to the be	est of my knowledge	2.0	
		above is true and		est of my knowledge	and belief	_
I hereby certif	y that the information of the Welliam	Sava	d complete to the bo	est of my knowledge	DATE 02-10-17	_
I hereby certification of the SIGNATURE	Ty that the information of the Welliam of the same of	Sava	d complete to the bo	est of my knowledge	DATE 02-10-17	_
I hereby certif	Ty that the information of the Welliam of the same of	Sava	d complete to the bo	est of my knowledge IDENT s:bsavage@amtexene	DATE 02-10-17 PHONE: (432) 770-0913	
I hereby certifold SIGNATURE Type or print For State Use	fy that the information of well and formation of the well and the well	Sava	d complete to the be	est of my knowledge	DATE 02-10-17 PHONE: (432) 770-0913	
I hereby certification of the second	fy that the information of well and formation of the well and the well	Sava	d complete to the bo	est of my knowledge IDENT s:bsavage@amtexene	DATE 02-10-17 PHONE: (432) 770-0913	