

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

Oil, Gas, Minerals and Natural Resources

Form C-103

Revised July 18, 2013

HOBBS OGD
MAR 07 2017
RECEIVED

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

WELL API NO. 30-025-12302
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name West Dollarhide Queen Sand Unit
8. Well Number 37
9. OGRID Number 309777
10. Pool name or Wildcat Dollarhide Queen
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3144' DF

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 ☒ Gas Well ☐ Other ☒ INJ.

2. Name of Operator
RAM Energy LLC

3. Address of Operator
5100 E Skelly Drive, Suite 600, Tulsa, OK 74135

4. Well Location
Unit Letter L : 2310 feet from the South line and 330 feet from the West line
Section 32 Township 24S Range 38E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
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.

3/9/17 Clean out fill. Closed loop system will be used.
Wellbore diagram attached.

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 CSwan TITLE Regulatory Administrator DATE 3/6/2017

Type or print name Connie Swan E-mail address: csswan@swanderlandok.com PHONE: 918-621-6533

For State Use Only
APPROVED BY: Malay Brown TITLE AO/II DATE 3/8/2017
Conditions of Approval (if any):

MB

Present Completion

API: 30-025-12302

GL:

KB:

WDQSU 37

Dollarhide #37

Casing Strings:

10-3/4" 40# @214

7" 20# @ 3660

4-1/2" 10.5# @3770

Tubing String:

2-3/8, 4.7 @3561

Packer @ 3556

Queen
3585-3731

PBTD @ 3665

TD = 3670

