

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 August 1, 2011

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. 30-005-60790 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>		5. Indicate Type of Lease STATE FEE X
2. Name of Operator State of New Mexico formerly Canyon E&P Company		6. State Oil & Gas Lease No.
3. Address of Operator 811 South 1 st Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Twin Lakes San Andres Unit ✓
4. Well Location Unit Letter <u>B</u> : <u>330</u> feet from the <u>North</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>12</u> Township <u>9S</u> Range <u>28E</u> NMPM Chaves County ✓		8. Well Number <u>91</u> ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number
		10. Pool name or Wildcat Twin Lakes; San Andres (Assoc) ✓

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

NOTICE OF INTENTION TO PERFORM REMEDIAL WORK <input type="checkbox"/> F TEMPORARILY ABANDON <input type="checkbox"/> C PULL OR ALTER CASING <input type="checkbox"/> M DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A XX CASING/CEMENT JOB <input type="checkbox"/> OTHER: _____
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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.

SEE ATTACHED

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

SIGNATURE _____ TITLE _____ DATE _____

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only

APPROVED BY: Mark W. Lita TITLE P.E.S. DATE 06/06/2017

Conditions of Approval (if any):

Plugging Report TLSAU #91

5/23/2017 Worked on road and cleared location (5/22/2017). Moved in rig and equipment and rigged up. No pipe in the well. Installed BOP and made gauge ring run. Tagged existing CIBP at 2418'. POOH with gauge ring. Moved work string from the #53 and started in the hole with a perforated sub and bull plug. Ran 40 joints and SION.

5/24/2017 Finish running work string and tagged up at 2425'. Circulated MLF and tested casing to 600#. Casing good. Spotted 50 sx cement on top of CIBP and POOH. Perforated 4 ½" casing at 1000'. Set packer at 696' and pressured up on perms. Could not establish rate. POOH with packer and RIH with open ended tubing to 1076'. Spot 25 sx cement at 1076'. ETOC at 714'. Laid down remaining tubing and perforated at 170'. Established rate and pumped cement down 4 ½" casing and up annulus to surface. Pumped 50 sx cement. Rigged down. Cement had fallen from surface inside the 4 ½" casing. Will cut off in the morning.

5/25/2017 Cut off wellhead. Filled up both strings with 10 sx cement. Installed marker and cut off anchors. Cleaned pit and cleared location.