

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

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

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. 30-025-11758 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> HOBBS OCD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> ✓
2. Name of Operator Herman L. Loeb LLC		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 838, Lawrenceville, Ill. 62439		7. Lease Name or Unit Agreement Name Cook ✓
4. Well Location Unit Letter <u>P</u> : 660' feet from the <u>South</u> line and 660' feet from the <u>East</u> line Section <u>28</u> Township <u>25S</u> Range <u>37E</u> NMPM County <u>Lea</u> ✓		8. Well Number #2 ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,020' DL		9. OGRID Number 264953 ✓
RECEIVED		10. Pool name or Wildcat Jalmat, Tan/Yates/7 Rv/Queens ✓

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

NOTICE OF INTENT PERFORM REMEDIAL WORK <input type="checkbox"/> F TEMPORARILY ABANDON <input type="checkbox"/> C PULL OR ALTER CASING <input type="checkbox"/> I DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	INT TO RA P&A NR <u>TM</u> ✓ P&A R' <u> </u>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

3/20/2017. Set CIBP @ 2,500'. Spotted 50 sks cmt on top of CIBP. Had returns up csg annulus during spot. Spot 18 bbls 9.5 ppg salt gel spacer @ 1,975' & had returns during spot. Established an injection rate out csg leak 971'-1,020'. Perf 1,260'. Attempt to establish an injection rate out perfs under packer & could not pressure up. Spot 80 sks cmt @ 1,388'. TOH & pressure to 150 psi. SI.

3/21/2017. Tgd plug @ 755'. Perf 215'. Established circ up csg annulus. Ppd 40 sks cmt & had good cmt to surface & left inside full.

3/23/2017. Cut off all csg strings & had cmt to surface. Welded on cap & installed dry hole marker.

Spud Date:

Rig Release Date:

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.
Restoration Due By 3-20-2018

I hereby certify that the information above is true and complete to the best of

SIGNATURE Michael Polley TITLE Agent for Herman L. Loeb LLC DATE 6/16/2017

Type or print name Michael Polley E-mail address: polleyms@gmail.com PHONE: 719-342-5600

For State Use Only

APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 06/19/2017

Conditions of Approval (if any):