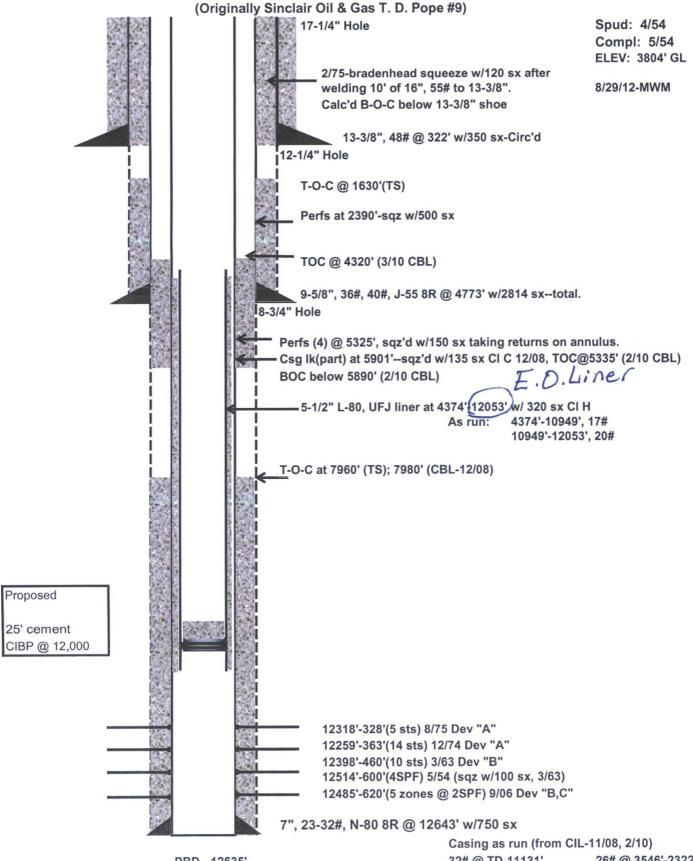
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103		
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.		
	- OH CONCEDIVATION DIVISION	30-025-05217		
811 S. First St., Artesia, NM 8821 <u>District III</u> – (505) 334-6178	BBSONCENSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease		
1000 D:- D D-1 A-+ NIM 07410		STATE FEE 6. State Oil & Gas Lease No.		
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	5 1 5 2017 Santa 1 6, 1441 67363	6. State Oil & Gas Lease No.		
	CESAMPREPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	TD POPE 36		
PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR SUCH	, w		
1. Type of Well: Oil Well	Gas Well Other	8. Well Number 9		
Name of Operator     Wishbone Texas Operating Cor	many LLC	9. OGRID Number 247128 370.56		
3. Address of Operator		10. Pool name or Wildcat		
	N #400, Houston, Texas 77064	Denton Devonian		
4. Well Location				
Unit Letter C :660'feet from the _North line and1650'feet from the				
Westline				
Section 36 Township 14S Range 37E NMPM County Lea  11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3804' GL				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐				
TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM				
OTHER:	OTHER:	d aire noutinent dates including estimated date		
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) MIRU Pulling Unit. POOH & LD Equipment.				
<ul> <li>(2) RU WL. TIH w/ 5 1/2" CIBP. Set @ 12,000'. Cap with 25' cement. RD WL.</li> <li>(3) PU and TIH w/tbg. Displace hole with corrosion inhibitor and fresh water.</li> </ul>				
(4) Notify NMOCD of casing integrity test.  Condition of Approval: notify				
(5) Pressure test the casing to 500# (with chart recorder) for 30 minutes.				
(b) Distribute for disposition with				
	P	rior 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.				
Thereby certify that the information above is true and complete to the best of my knowledge and benefit.				
CICNIAGUE	TITLE Follows	DATE 08/25/2017		
SIGNATURE / JWA				
Type or print name 1/m WALL E-mail address: TWALL @ldis HBONE: 832 807 2215				
For State Use Only				
APPROVED BY: Vally VO LOW TITLE HOLL DATE 7/16/2017				
Conditions of Approval (if any): (1) PPOD REPORTED - 42 MONTHS				
The second secon	(AII) TRUI) APPAPIEN - 4	VIVOITAD NOTOCION TO PINONIO		

## T. D. Pope 36-9 - 660' FNL & 1650' FWL of Sec. 36, T-14S, R-37E, UL "C" API # 30-025-05217



PBD - 12635' TD - 12644'

32# @ TD-11131'

26# @ 3546'-2322'

29#@11131'-8974'

29#@ 2322'-950'

26# @ 8974'-7004' 23# @ 7004'-3546' 32# @ 950'-surf'