

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88241  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87419  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources  
**HOBBS OCD**  
**OIL CONSERVATION DIVISION**  
220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

WELL API NO. 30-025-03555
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 317624
7. Lease Name or Unit Agreement Name FOX A STATE
8. Well Number 002
9. OGRID Number 371115
10. Pool name or Wildcat <del>LOVING</del> Allison; SAN ANDRES, SOUTH#

**RECEIVED**

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 ☐

2. Name of Operator  
ROCKCLIFF OPERATING NEW MEXICO LLC

3. Address of Operator  
1301 MCKINNEY; STE 1300; HOUSTON, TX 77010

4. Well Location  
Unit Letter H : 1980 feet from the N line and 660 feet from the E line  
Section 02 Township 09S Range 36E NMPM County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Well is on OCD inactive list. Rockcliff Operating NM LLC requests TA status for 12 months until a more economic climate exists for recompletion.

Proposed TA Procedure:

1. Pull Rods / Tubing from well
2. Tag cement / CIBP @ 9,600ft, Circ hole w/ FW + biocide & corrosion inhib
3. Set 5.5in CIBP @ 4,830ft (Within 100ft of uppermost perf)
4. Tag 5.5in CIBP, Circ hole w/ FW + biocide & corrosion inhib
5. Spot 25 sxs @ 4,830ft-4,730ft, WOC 4hrs, Tag cmt
6. Circ hole w/ FW + biocide & corrosion inhib
7. Psi test to 500psi for 30mins, BLM must witness and OK

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 Jamie A. Robinson TITLE SR REGULATORY ANALYST DATE 10/05/17

Type or print name JAMIE A. ROBINSON E-mail address: JROBINSON@ROCKCLIFFENERGY.COM PHONE: 713-351-0534

For State Use Only  
APPROVED BY: Mary Brown TITLE AO/II DATE 10/5/2017  
Conditions of Approval (if any):