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 SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPL PROPOSALS.) 1. Type of Well: Oil Well 2 2. Name of Operator EnergyQuest II, LLC 3. Address of Operator 4526 Research Forest Drive, Suite 4. Well Location	Santa Fe	ATION St. Fran , NM 87 NO N WELLS EN OF PL A C-100, EC	ral Resources DIVISION eis SrocD 505 2 9 2017	WELL API NO. 30-025-34092 5. Indicate Type of Lease	greement Name
Unit LetterM	: 1305 feet from the	South	line and 130	<u>feet from the</u>	Westline
Section <u>16</u>		and the second se	Range <u>33E</u>	NMPM Lea	County
	11. Elevation (Show wh	ether DR,	RKB, RT, GR, etc.)		
INT TO PA OF INTENTION TO: SUB P&A NR PLUG AND ABANDON □ REMEDIAL WOR P&A R □ CHANGE PLANS □ COMMENCE DR P&A R □ MULTIPLE COMPL □ CASING/CEMEN				NG CASING	
 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. MIRU P&A equipment. Set CIBP at 4,200'. Tested casing to 500 psi. Circulated 10.5 ppg mud. Capped CIBP with 25 sx cement. Mixed and pumped 25 sx plug 2,350' - 2,600'. Perforated at 1,550'. Unable to inject. Called Mark Whitaker. Mixed and pumped 25 sx plug 1,350' - 1,600'. Tagged at 1,390'. Perforated at 608'. Unable to inject. Called Mark Whitaker. Mixed and pumped 25 sx plug 408'-608'. Tagged at 400'. Perforated at 100'. Mixed and pumped 35 sx. Circulated to surface. Cut wellhead. Installed dry hole marker. 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 <u>B-22-2018</u>					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE DUBTA VI	Noor TITL	E_Produc	tion Analyst	DATE <u>11/27/2017</u>	
Type or print name	E-ma	il address		PHONE:	
APPROVED BY: Malchital TITLE P.E.S. DATE 11/29/2017 Conditions of Approval (if any):					