Submit I Copy To Appropriate District State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
District II - (575) 748-1283 OIL CONSERVATION DIVISION	30-025-0000000-48059
811 S. First St., Artesia, NM 88210OTE CONSERVATION DIVISIONDistrict III - (505) 334-61781220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 1220 Sociali St. 1 failors D1. District IV - (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	
87505 SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	MCCASLAND GWD
PROPOSALS.)	8. Well Number
1. Type of Well: Oil Well Gas Well Other SWD 2. Name of Operator Gas Well Gas Well Other	9. OGRID Number
MESCALERO ENERGY, LLC	370198
3. Address of Operator	10. Pool name or Wildcat
510 BERINGDR, SUITE 430, HOUSTON TX 77057	
4. Well Location Unit Letter H : 1723 feet from the NORTH line and 5	90 feet from the EAST line
	NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
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	JOB 🗌
DOWNHOLE COMMINGLE	was never chilled ; lease is expirity
CLOSED-LOOP SYSTEM	ish to cancel permit & any to
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 Com proposed completion or recompletion.	pletions: Attach wellbore diagram of
proposed completion of recompletion.	Mal Fund
×	other mailing registrations or
	permits or
	MARONAS
	(Industry Obkil)
	(CG)SWGON)
Spud Date: N/A Rig Release Date: N/A	
	J
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
I nereby certify that the information above is true and complete to the best of my knowledge and benef.	
SIGNATURE AMANN N. W.M. TITLE PARTNER	DATE 1205 2017
	HOLDINGJ. OPHONE: 713-364.6998
For State Use Only Petroleum Eng	vincer / _/
APPROVED BY: TITLE	DATE 12/18/17
Conditions of Approval (If any):	