

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
HOBBS OCD
OIL CONSERVATION DIVISION
220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

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. 30-025-04018
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Rhombus Operating Co., Ltd.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 627, Littleton, CO 80160-0627		7. Lease Name or Unit Agreement Name Northwest Eumont Unit
4. Well Location Unit Letter P : 660 feet from the South line and 660 feet from the East line Section 15 Township 19S Range 36E NMPM County Lea		8. Well Number 117
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 19111
		10. Pool name or Wildcat Eumont Yates 7 RVRU-Q

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: **TA extension** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: **T/A TEST** ☒

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.

3/5/18 MIRU pump truck & chart recorder. Pressure up casing and held. See attached chart for details. RDMO pump truck.

This Approval of Temporary
Abandonment Expires **3/5/2019**

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 *Cindy [Signature]* TITLE Office Manager DATE 3/5/18

Type or print name Mary S Brown E-mail address: AO/II PHONE:

For State Use Only

APPROVED BY: *Mary S Brown* DATE 3/6/2018

Conditions of Approval (if any):

mb

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Rhombus</i>		API Number <i>30-025-04018</i>	
Property Name <i>North West Eumont</i>		Well No. <i>117</i>	

7. Surface Location									
UL - Lot <i>P</i>	Section <i>15</i>	Township <i>19S</i>	Range <i>36E</i>		Feet from <i>660</i>	N/S Line <i>5</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>LCA</i>

Well Status									
TA'D WELL. YES <i>2</i>	NO <i>2</i>	SHUT-IN YES <i>2</i>	NO	INJ	SWD	PRODUCER OIL <i>2</i>	GAS	DATE <i>3/5/18</i>	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>4</i>	<i>✓</i>	<i>—</i>	<i>4</i>	<i>4</i>
Flow Characteristics					
Pull	<i>Y / 8</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 —
Steady Flow	<i>Y / 8</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / 8</i>	WTR —
Surges	<i>Y / 8</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / 8</i>	GAS —
Down to nothing	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	Type of Fluid
Gas or Oil	<i>Y / 8</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / 8</i>	Injected for
Water	<i>Y / 8</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / 8</i>	Water-flood if applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

1/A TEST

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <i>3/5/18</i>	Phone:		
Witness: <i>Boone</i>			

INSTRUCTIONS ON BACK OF THIS FORM