

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

Form C-103
Revised August 1, 2011

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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. 30-005-01113
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 type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator REMNANT OIL OPERATING, LLC		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 5375, Midland, TX 79704		7. Lease Name or Unit Agreement Name ZIMMERMAN
4. Well Location Unit Letter L : 1650 feet from the S line and 990 feet from the W line Section 21 Township 14S Range 31E NMPM County CHAVES		8. Well Number 004
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 370922
		10. Pool name or Wildcat CAPROCK; QUEEN

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 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"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	RETURN TO PRODUCTION

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.

CHANGE PUMP

02/05/2018

MIRU:

Continued

Tubing depth?

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Carie Stoker TITLE Regulatory Affairs Coordinator DATE: 04/26/2018

Type or print name Carie Stoker E-mail address: carie@stokeroilfield.com PHONE: 432.664.7659

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 4-30-18
Conditions of Approval (if any):

ZIMMERMAN # 004

Continued:

2/05/2018

Removed horse head. Unseated pump. Checked casing pressure. Pressure @ 100PSI. Waited for vacuum truck and hot oiler to arrive. Pumped 20 bbls of hot water. TOH W/rods and pump. Circulated 40 bbls of hot water dwn tubing. Put valve on. SDFN

02/06/2018

Checked casing and tbg pressure. Pressure @ 200PSI each. Bled off tbg. and casing. TIH W/standing valve. Tested @ 500PSI. Tested good. Fished standing valve. TIH W/new pump. TIH W/rods. Put horse head on, respaced well. Hung well. Pumped good. RD, cleaned location.