

MAY 15 2018

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

Record Clean Up

WELL API NO.

30-025-41771

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Laguna "16" State

8. Well Number 5H

9. OGRID Number

151416

10. Pool name or Wildcat

Salt Lake; Bone Spring

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

Fasken Oil and Ranch, Ltd.

3. Address of Operator

6101 Holiday Hill Road, Midland, TX 79707

4. Well Location

Unit Letter M : 330' feet from the South line and 330' feet from the West lineSection 16 Township 20S Range 32E NMPM County Lea

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

3513' GR

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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☒OTHER: Salt Protect ☒

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.

7-1-14 - 7-3-14

Drilled a 17 1/2" hole from 1047' - 2565'. Ran 58 jts. of 13-3/8" 54.5 & 61# K-55 BT&C casing to 2,549'. Cemented w/ Pumped 20 bfw followed by 1335 sx Class C with 12% salt, 4% gel, and 0.2% antifoam (s.w. 12.6, yield 2.24 ft³/sx) plus 400 sx Class "C" with 0.1% retarder (s.w. 14.8 ppg, yield 1.33 ft³/sx). Plug down at 5:15 pm CDT 7-2-14. Bumped plug to 1425 psi, floats held. Circulated 439 sx excess cement. Centralized casing every 4th joint to surface for a total of 15 centralizers. WOC time 26.5 hrs. Pressure test 13 3/8" casing to 1000 psi.

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 Kim Tyson TITLE Regulatory Analyst DATE 8-6-2014Type or print name Kim Tyson E-mail address: kimt@forl.com PHONE: 432-687-1777

For State Use Only

APPROVED BY: Jaren Sharp TITLE Staff Mgr DATE 5-15-18

Conditions of Approval (if any):