| Submit 1 Copy To Appropriate District Office | State of New Mexico | | Form C-103 |
|--|---|--|---|
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | istrict I – (575) 393-6161 Energy, Minerals and Natural Resources | | Revised July 18, 2013 WELL API NO. |
| District II - (575) 748-1283 | District II - (575) 748-1283 OIL CONSERVATION DIVISION | | 30-025-44157 |
| District III – (505) 334-6178 1220 South St. Francis Dr. | | The state of the s | 5. Indicate Type of Lease STATE X FEE |
| 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 | Santa Fe, NM 87 | 7505 | 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 | | OUTLAND 14-23 STATE COM 2BS | |
| PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other | | 8. Well Number 2H | |
| Name of Operator CHISHOLM ENERGY OPERATING, LLC | | | 9. OGRID Number |
| 3. Address of Operator 801 CHERRY STREET, SUITE 1200-UNIT 20 | | 372137 10. Pool name or Wildcat | |
| FORT WORTH, TX 76102 | | | GRAMA RIDGE; BONE SPRING |
| 4. Well Location | | | |
| Unit Letter D: | 200 feet from the NOR | | feet from the WEST line |
| Section 14 | 1 | | NMPM LEA County |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3709 | | | |
| | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK PLUG AND ABANDON PROPERTY ABANDON PR | | | |
| TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐ | | | |
| DOWNHOLE COMMINGLE | | | |
| CLOSED-LOOP SYSTEM | _ | | _ |
| OTHER: | pleted operations (Clearly state all r | OTHER: | give pertinent dates including estimated date |
| 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. | | | |
| 05/08/2018- AMEND LP AND BHL, AMEND SETTING DEPTH AND SACKS OF CMNT FOR INTERMEDIATE STRING AND SACKS OF CEMENT AND ESTIMATED TOC ON PRODUCTION STRING; ADD COM TO NAME | | | |
| 7 | | | |
| ADD COM TO NAME: FROM: OUTLAND 14-23 STATE 2BS; TO: OUTLAND 14-23 STATE COM 2BS **Comparison of the comparison of the c | | | |
| AMEND BHL-FROM: 2310 FNL/460 FWL; TO: 2310 FNL/660 FWL AMEND INTERMEDIATE CSG - | | | |
| SETTING DEPTH FROM: 5700' MD; TO: 5500' MD | | | |
| SXS OF CEMENT FROM: 2361 SXS; TO: 2280 SXS AMEND PROD CASING- | | | |
| SXS OF CMNT FROM: 3149 SXS; TO: 3200 SXS | | | |
| EST TOC FROM: 4700' MD; TO: 4500' MD | | | |
| | | | |
| 0.15. | | | |
| Spud Date: | Rig Release Da | ite: | |
| | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | |
| | | | |
| SIGNATURE Gennifer of | Elrod TITLE SR. R | EGULATORY ANALYS | T DATE 05/08/2018 |
| Type or print name JENNIFER ELRO | | g: jelrod@chisholmene | rgy.com PHONE: 817-953-3728 |
| For State Use Only | | | |
| APPROVED BY: TITLE Petroleum Engineer DATE 05/21/8 | | | |
| Conditions of Approval (Fany): | | | |