

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 July 18, 2013

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

WELL API NO. 30-025-30029
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> /
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Melissa /
8. Well Number 001 /
9. OGRID Number 5691
10. Pool name or Wildcat Morton Wolfcamp East

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Dakota Resources Inc. (I) JUN 11 2018	
3. Address of Operator 4914 N. Midkiff Rd, Midland, TX 79705 RECEIVED	
4. Well Location Unit Letter O : 660 feet from the South line and 1980 feet from the East line Section 34 Township 14S Range 35E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3998 GR	

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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	

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.

4/16/18

Set CIBP @10,230' and dumped 6 sks cement on top. Re-perforate existing perfs at 1 JSPF 10,129-10,139, 10,166-10,171 & 10,176-10,184. Acidized well with 8000 Gal 20% gelled acid @ 4.2 BPM. Over displace acid w/ 80 BBL FW. Swab test. Run in hole with tubing, rods and pump. Put well on production.

? @ 10,220
per CM

Provide tubing detail

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 Chris M. Morphew TITLE President DATE 6/7/18

Type or print name Chris M Morphew E-mail address: chrism@dakotares.com PHONE 432-697-3420
For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 6-12-18
Conditions of Approval (if any):