Submit 1 Copy To A	ppropriate District	t - -	State of New N	1exico		Form C-103
District 1 – (575) 393	3-6161	BBS OF	Minerals and Na	tural Resources	WELL API NO.	Revised August 1, 2011
Submit 1 Copy To Appropriate District Office District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM PABSET OF Minerals and Natural Resources District II – (575) 748-1283 Other ONSER VATION DIVISION					30-025-44612	
District III – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 SEP 1 220 South St. Francis Dr.					5. Indicate Type of	
1000 Rio Brazos Rd., Aztec, NM 87410					STATE 🛇	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM RECEIVE D anta Fe, NM 87505					6. State Oil & Gas I 19552	Lease No.
	SUNDRY N		Init Agreement Name			
(DO NOT USE THIS DIFFERENT RESEI PROPOSALS.)		South Hobbs (G/SA Section 5				
1. Type of Well		8. Well Number: 29				
2. Name of Ope Occidental Perm		9. OGRID Number:	: 157984			
3. Address of Operator					10. Pool name or W	'ildcat
HCR 1 Box 90 E	Denver City, T	Hobbs (G/SA)				
4. Well Location						
1					feet from the West	
Section 5 Township 19-S Range 38-E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
		3639' (KB		r, kkb, k1, Gk, eic.		
			, , , , , , , , , , , , , , , , , , , 		Control of the contro	Processed to the control of the cont
	12. Chec	k Appropriate	Box to Indicate	Nature of Notice,	Report or Other D	ata
					SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL						LTERING CASING 🗍 AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT						AND A
DOWNHOLE CO			_		_	
OTHER:			ation	OTHER:		
					d give pertinent dates,	including estimated date
of startin	g any proposed				mpletions: Attach wel	
1 MIDNIBULA	UDOD					
 MIRU PU. NU BOP RIH with bit and drill out well to float collar During this					procedure we plan to use	
3 Log well (GR/CCL/CRL) the closed-					loop system with a steel	
4. Selectively perforate San Andres formations w/ 4 SPF tank and ha					aul contents to the required	
(Perfs zone to be selected based on log – Step 3) 5. AT new perfs with 15% HCL disposal per ODC Rule 19.15.17						
		ided based on log	(– Step 3)			
6. RIH with injection equipment					ndition of Appro	val: notify
o Data and anthro					CD Hobbs office 24 hours	
•						
					of running MIT	
Spud Date:			Rig Release	Date:]
<u> </u>						
Lhereby certify the	at the informati	ion above is true	and complete to the	best of my knowledg	e and helief	·
i necess corning in	مصب		and complete to the	out of my knowledg		
SIGNATURE			TITLE Produ	ction Engineer	DATE09	<u>/08/2018</u>
and once app		-/-				
Type or print nam	e <u>Car</u>	los Restrepo	E-mail address	carlos restrepo@ox	y.com PHONE: 71:	<u>3-366-5147</u>
For State Use On	M -	1. HR	^	101+		01-1-010
APPROVED BY:	YVV	yeyyyx	TITLE	MOIT	DATE	9/10/2018
Conditions of App	oroval (if any):			7		
Additional Data	that would not	t tit of the form.				