

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

Form C-103
Revised July 18, 2013

WELL API NO. 30-025-44967	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Juice Bud State Com	
8. Well Number 502H	
9. OGRID Number 372165	
10. Pool name or Wildcat WC-025 G-07 S213430M; Bone Spring	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3742 GR	

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
Centennial Resource Production, LLC

3. Address of Operator
1001 17th Street, Suite 1800, Denver, CO 80202

4. Well Location
Unit Letter **N** : **6040** feet from the **South** line and **1963** feet from the **West** line
Section **19** Township **21S** Range **34E** NMPM County **Lea**

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: Completion	<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.

9/2/18 Test production csg to 10,531# for 30mins, good test.

9/8/18 - 9/17/18 Perf & Frac 29 Stages 11, 252 - 18,096 w/15,449,448 Slick water, 18,888,030# 100 mesh sand. 1470 holes.

9/18/18 - 9/19/18 Drill out plugs. PBTD @ 18,111.

9/20/18 Turn well over to Production. Well is flowing on a 64/64 choke.

Spud Date:

8/3/18

Rig Release Date:

8/29/18

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

SIGNATURE K. C. TITLE Sr. Regulatory Analyst DATE 10/16/18

Type or print name Kanicia Castillo E-mail address: kanicia.castillo@cdevinc.com PHONE: 720-499-1537
For State Use Only

APPROVED BY Karen Sharp TITLE Staff Mgr DATE 10-24-18
Conditions of Approval (if any):