

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 S. St. Francis Dr., Santa Fe, NM 87505
NOV 01 2018

WELL API NO. 30-025-43935
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 Tour Bus 23 State
8. Well Number 504H
9. OGRID Number 372165
10. Pool name or Wildcat Ojo Chiso; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3463 GR

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DRILL FOR OR 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 Centennial Resource Production, LLC	
3. Address of Operator 1001 17th Street, suite 1800, Denver, CO 80202	
4. Well Location Unit Letter C : 201 feet from the North line and 2215 feet from the West line Section 23 Township 22S Range 34E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3463 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: Install tubing <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.

1/31/18 RIW w/306jts 2-7/8 6.5# L80 tbg, set @ 9863 and 13 Gas Lift Valves.

Spud Date:

10/8/17

Rig Release Date:

10/28/17

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 **10/30/18**

Type or print name **Kanicia Castillo**

E-mail address: **kanicia.castillo@cdevinc.com**

PHONE: **720-499-1537**

For State Use Only

Petroleum Engineer

APPROVED BY:

TITLE

DATE

11/2/18

Conditions of Approval (if any):