

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

HOBBS OGD  
JAN 18 2019  
RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.)		WELL API NO. <b>30-025-41715</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>BC Operating, Inc.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>P.O. Box 50820 Midland, TX 79710</b>		7. Lease Name or Unit Agreement Name <b>Weissbeir 23</b>
4. Well Location Unit Letter <b>O</b> : <b>265</b> feet from the <b>South</b> line and <b>1350</b> feet from the <b>East</b> line Sectional <b>14</b> Township <b>17S</b> Range <b>37E</b> NMPM. County <b>Lea</b>		8. Well Number. <b>1H</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number. <b>160825</b>
		10. Pool name or Wildcat <b>Hobbs Channel; Bone Spring</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

JPM

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"/>	PANDA <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 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.

8/28/18—MIRU.

8/29/18—Tag existing CIBP @ 9205' circ well w/ MLF, PUH to 8540' spot 30 sxs H CTOC @ 8337' SIW.

8/30/18—Tag @ 8400' spot 25 sxs @ 6483' CTOC @ 6325', spot 25 sxs @ 5392' TOC @ 5234' spot 25 sxs @ 3750' TOC @ 3592.

8/31/18—Tag @ 3619' perf @ 3554' set pkr @ 3183' pressure u OCD ok'd to spot 30 sxs @ 3615' WOC Tag @ 3425'. Perf @ 2394' sqz 65 sxs TOC @ 2160' SIW.

9/04/18—Tag @ 2100' perf @ 2015' sqz 40 sxs TOC @ 1871' WOC Tag @ 1860', perf @ 450' circ 150 sxs to surface verified RDMO.

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 Romero TITLE Agent DATE 9/13/18

Type or print name Chris Romero E-mail address: \_\_\_\_\_ PHONE: 432-563-3355

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 1-22-19  
Conditions of Approval (if any): \_\_\_\_\_