Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	zgy,	WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-05133
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	c.O	
DIFFERENT RESERVOIR. USE "APPLIC	CES AND REPORTS ON WELLS. SALS TO DEILL OR TO DEEPEN OF SHORE SHOR	7. Lease Name or Unit Agreement Name Shelton
PROPOSALS.) 1. Type of Well: Oil Well		8. Well Number 006
2. Name of Operator Wishbone Texas Operating Compa		9. OGRID Number 370256
3. Address of Operator		10. Pool name or Wildcat
10613 W. Sam Houston Pkwy N #4	400, Houston, Texas, 77064	Devonian
4. Well Location		
Unit LetterD	: 990 feet from the North li	ne and660feet from the
Westline		
Section 26	Township 14S Range 37E	
	11. Elevation (Show whether DR, RKB, RT, GR, etc.,	
	3822'	
12. Check A	appropriate Box to Indicate Nature of Notice,	Report or Other Data
NOTICE OF IN	TENTION TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON REMEDIAL WOR	
TEMPORARILY ABANDON `	CHANGE PLANS COMMENCE DRI	LLING OPNS.□ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL	T JOB
DOWNHOLE COMMINGLE		_
CLOSED-LOOP SYSTEM OTHER:	□ OTHER: 1	4 wichant
	leted operations. (Clearly state all pertinent details, and	d give pertinent dates, including estimated date
	rk). SEE RULE 19.15.7.14 NMAC. For Multiple Con	mpletions: Attach wellbore diagram of
proposed completion or rec	ompletion.	
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MIT TA Extension	This Approval of Temporary	!
	Abandonment Expires	3-20-2021
		Annian Marie Andrea (Annie Annie Ann
	<u></u>	
Spud Date:	Rig Release Date:	
I hereby certify that the information	above is true and complete to the best of my knowledg	e and belief.
	_	
SIGNATURE /// AUAN () 7	TITLE PROJUCTION FOREMAN	DATE 3:1019
SIGNATURE WayN Way	TITE / KANAC INDA A CONTRACTOR	
Type or print name WAYNG SIX	E-mail address: Whixow h) uncul	PHONE: 43-55-5933
For State Use Only		
\sim	1.1	11. 1-14
APPROVED BY: Conditions of Approval (if any):	TITLE Compliance	Spice ADATE 4-1-19

