

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

WELL API NO. <b>30-025-45181</b>
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 <b>Airstream 24 State Com</b>
8. Well Number <b>502H</b>
9. OGRID Number <b>372165</b>
10. Pool name or Wildcat

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator <b>Centennial Resource Production, LLC</b>
3. Address of Operator <b>1001 17th Street, suite 1800, Denver, CO 80202</b>
4. Well Location Unit Letter <b>M</b> : <b>550</b> feet from the <b>South</b> line and <b>1270</b> feet from the <b>West</b> line Section <b>13</b> Township <b>22S</b> Range <b>34E</b> NMPM County <b>LEA</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3499 GR</b>

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: <b>Install tubing &amp; pump</b>	<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.

3/7/19 RIH w/285jts 2-7/8, 6.5# L80 tubing set @ 9661 and ESP.

Spud Date:

10/20/18

Rig Release Date:

12/13/18

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 **4/3/19**

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

*4-11-19*

Conditions of Approval (if any):