

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 August 1, 2011

HOBBES OGD
APR 24 2019
RECEIVED
OIL CONSERVATION DIVISION
HOBBES OGD
APR 24 2019

WELL API NO. 30-005-20986
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 NEW MEXICO BX STATE
8. Well Number 7
9. OGRID Number 190595
10. Pool name or Wildcat CHAVEROO SA

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
ENDEAVORENERGY RESOURCES, LP

3. Address of Operator
110 N. MARIENFELD, STE 200 MIDLAND, TX 79701

4. Well Location
Unit Letter F : 1980 feet from the NORTH line and 1980 feet from the WEST line
Section 16 Township 8S Range 33E NMPM CHAVES County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4401' 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 checked="" 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"/>			
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.

02/27/19-NOTIFIED NMOCD.
02/28/19-MIRU. TAGGED CIBP/CMT@4165'.
03/01/19-CIRCULATED MLF AND TESTED CASING@500#. PERFD@2425'. COULD NOT EIR@1500#. RECEIVED APPROVAL FROM NMOCD-KERRY AND SPOTTED 25SX FROM 2475'-2175'.
03/04/19-TAGGED@2150'. PERFD@2065'. COULD NOT EIR@1500#. RECEIVED APPROVAL FROM NMOCD-KERRY AND SPOTTED 25SX FROM 2115'-1815'.
03/05/19-TAGGED@1816'. PERFD@450'. SQUEEZED 25SX FROM 450'-350'. WOC&TAGGED@347'. SPOTTED 10SX FROM 30'-SURFACE.

CUTOFF WELLHEAD, ANCHORS 3' BELOW SURFACE AND INSTALLED DRYHOLE MARKER. TURN OVER FOR RECLAMATION.

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 [Signature] TITLE SR REGULATORY ANALYST DATE 03/29/19

Type or print name JAN SOUTH E-mail address: JSOUTH@EERONLINE.COM PHONE: (432)687-1575

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