Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District <u>J</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-041-20105
* <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION PICTON	5. Indicate Type of Lease
District III - (505) 334-6178	1220 Sall St. Francis Dr.	STATE STEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe. NM 2875969	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	APR 20 2013	
87505 SLINDRY NOT	ICES AND REPORTS ON WELLIVED	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	OSALS TO DRILL OR TO DEHPEN ON PLUG BACK TO A	7. Double I value of Content Agreement I value
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Jennifer Chaveroo SA Unit
1. Type of Well: Oil Well  Gas Well  Other		8. Well Number
		24
2. Name of Operator		9. OGRID Number
Ridgeway Arizona Oil Corp  3. Address of Operator		164557 10. Pool name or Wildcat
1250 Wood Branch Park Drive, Suite 400, Houston, Texas 77079		Chaveroo- San Andreas
4. Well Location		
Unit Letter F: 1650 feet from the North line and 1650 feet from the West line		
_	wnship 7S Range 34E NMPM	County Roosevelt
Section 29 100	11. Elevation (Show whether DR, RKB, RT, GR, etc.	
	4452.6 GR	.)
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
12. Check rippropriate Box to indicate retailed, respect of other Butter		
	· · · · · · · · · · · · · · · · · · ·	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING		IT JOB
DOWNHOLE COMMINGLE	<u>.                                      </u>	
CLOSED-LOOP SYSTEM		. 57
OTHER:	OTHER: MIT to	
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.		
proposed completion of recompletion.		
Attached is the MIT test for the above referenced well, Jennifer #24.		
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 TITLE Regulatory Analyst DATE April 23, 2019		
TITLE Regulatory Alialyst DATE April 23, 2019		
Type or print name Josh Blanchard E-mail address: jblanchard@atex-energy.com PHONE: (337) 522-0780		
For State Use Only		
APPROVED BY: 'Kerry forthe TITLE Compliance Office A DATE 5-10-19 Conditions of Approval (if and):		
Conditions of Approval (if and):		

