

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. 30-025-24176
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-4160
7. Lease Name or Unit Agreement Name North Vacuum Abo North Unit 3
8. Well Number #001
9. OGRID Number 373671
10. Pool name or Wildcat North Vacuum Abo (61760)

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> Injection	
2. Name of Operator Unitex Oil & Gas, L.L.C.	
3. Address of Operator 508 West Wall, Suite 1000, Midland, Texas 79701	
4. Well Location Unit Letter <u>J</u> : <u>1780</u> feet from the <u>SOUTH</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>1</u> Township <u>17-S</u> Range <u>34-E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4031.5' GL	

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: MIT Test <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.

MIT test performed on May 2, 2019.

HOBBS OCD  
MAY 17 2019  
RECEIVED

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

*Rita Walterscheid*

TITLE Regulatory Manager

DATE 05/09/2019

Type or print name Rita Walterscheid

E-mail address: ritaw@unitexoil.com

PHONE: (432) 685-0014

For State Use Only

APPROVED BY:

*Kerry Fath*

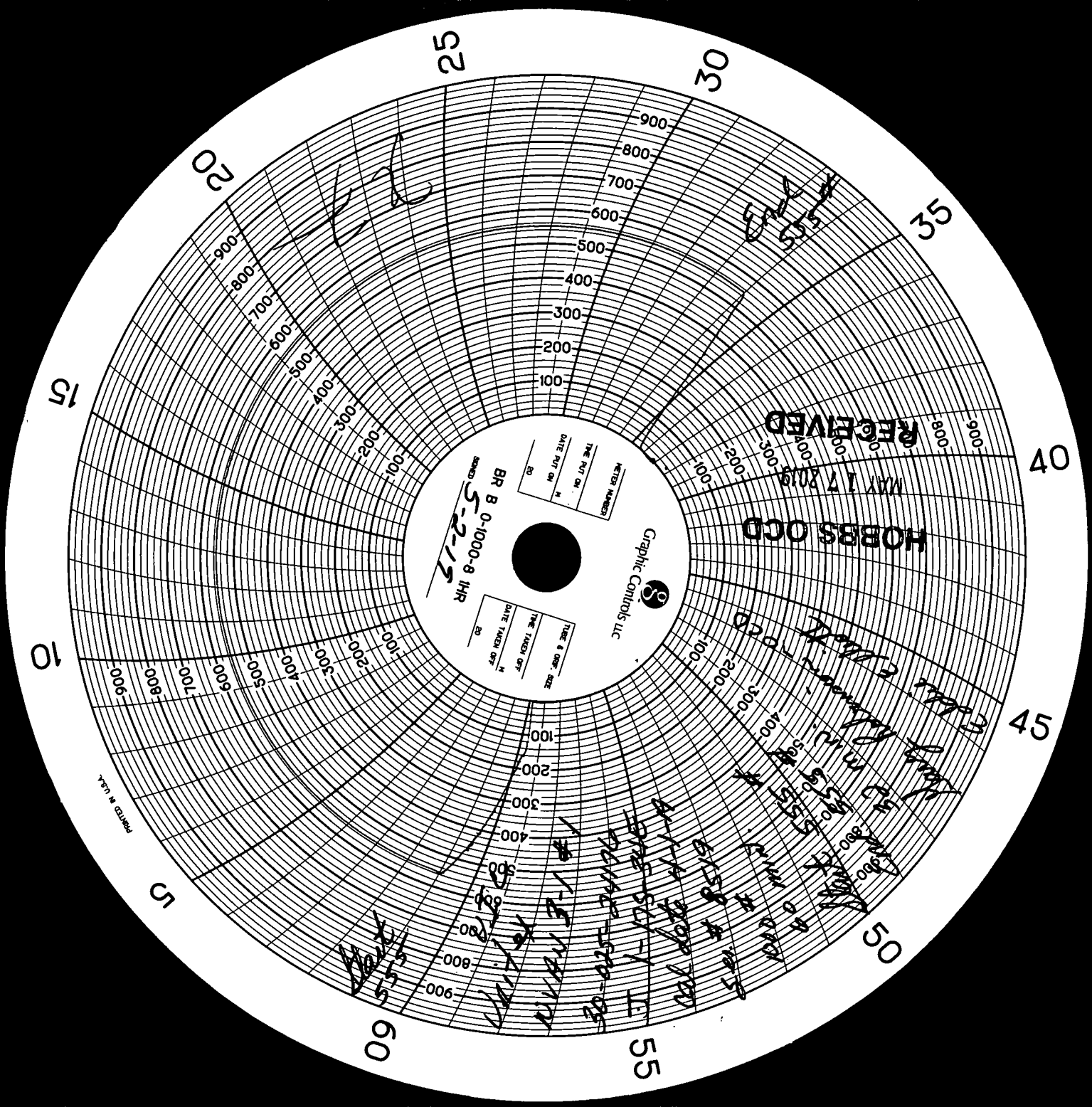
TITLE

*Compliance Officer*

DATE

*5-20-19*

Conditions of Approval (if any):



**District I**1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720**State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office****BRADENHEAD TEST REPORT**

Operator Name <b>UNITEX OIL &amp; GAS, L.L.C.</b>		API Number <b>30-025-24176</b>	
Property Name <b>NORTH VACUUM ABO NORTH UNIT 3-1</b>		Well No. <b>001</b>	

**7. Surface Location**

UL - Lot <b>J</b>	Section <b>1</b>	Township <b>17S</b>	Range <b>34E</b>		Feet from <b>1780</b>	N/S Line <b>S</b>	Feet From <b>2000</b>	E/W Line <b>E</b>	County <b>LEA</b>
----------------------	---------------------	------------------------	---------------------	--	--------------------------	----------------------	--------------------------	----------------------	----------------------

**Well Status**

TA'D Well YES <b>NO</b>	SHUT-IN YES <b>NO</b>	INJECTOR <b>INJ</b> SWD	PRODUCER OIL GAS	DATE <b>5-2-19</b>
----------------------------	--------------------------	----------------------------	---------------------	-----------------------

**OBSERVED DATA**

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>0</b>	<b>NA</b>	<b>0</b>	<b>1000</b>
Flow Characteristics					
Puff	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	CO2 _____
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR _____
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS _____
Down to nothing	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	If applicable type
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	fluid injected for
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Waterflood

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
-------	-------	-------	--------	-------

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**HOBBS OCD  
MAY 17 2019  
RECEIVED**

Signature: <b>Eddie Elliott</b>		OIL CONSERVATION DIVISION	
Printed name: Eddie Elliott		Entered into RBDMS	
Title: Production Supervisor		Re-test	
E-mail Address: eelliott@unitexoil.com			
Date:	Phone: 432-999-8423		
Witness: <b>Ray Johnson</b>			