

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. 30-025-45625
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 GRAMA RIDGE EAST 34 STATE COM 5BS
8. Well Number 5H (317782)
9. OGRID Number 372137
10. Pool name or Wildcat GRAMA RIDGE; BONE SPRING, NE (28435)

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator CHISHOLM ENERGY OPERATING, LLC
3. Address of Operator 801 CHERRY STREET, SUITE 1200-UNIT 20 FORT WORTH, TX 76102
4. Well Location Unit Letter O : 143 feet from the SOUTH line and 1369 feet from the EAST line Section 34 Township 21S Range 34E NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3616 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 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: COMPLETIONS <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.

06/03/2019-PBTD @ 16022', RAN CBL; EST TOC @ 4600'  
06/04/2019-SET STAGE 1 PLUG @ 16005'; PRESSURE TEST PROD CSG TO 9800 PSI FOR 30 MIN; GOOD TEST; PERFORATE STAGE 1, 15990'-15810'  
06/12-06/18/2019-COMplete PERFORATIONS STAGE 2-23, 15776'-11190'; FRACTURE W/536 BBLS HCl +143466 BBLS SW W/4614459# 100 MESH + 2639947# 40/70 SAND  
06/20-06/21/2019-DRILL OUT; INSTALL PROD TREE  
06/25/2019-TURN WELL TO FLOWBACK

Spud Date:

04/05/2019

Rig Release Date:

05/02/2019

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jennifer Elrod TITLE SR. REGULATORY TECH DATE 06/25/2019

Type or print name JENNIFER ELROD E-mail address: jelrod@chisholmenergy.com PHONE: 817-953-3728

For State Use Only

APPROVED BY Karen Sharp TITLE Staff Mgr DATE 6-26-19  
Conditions of Approval (if any):