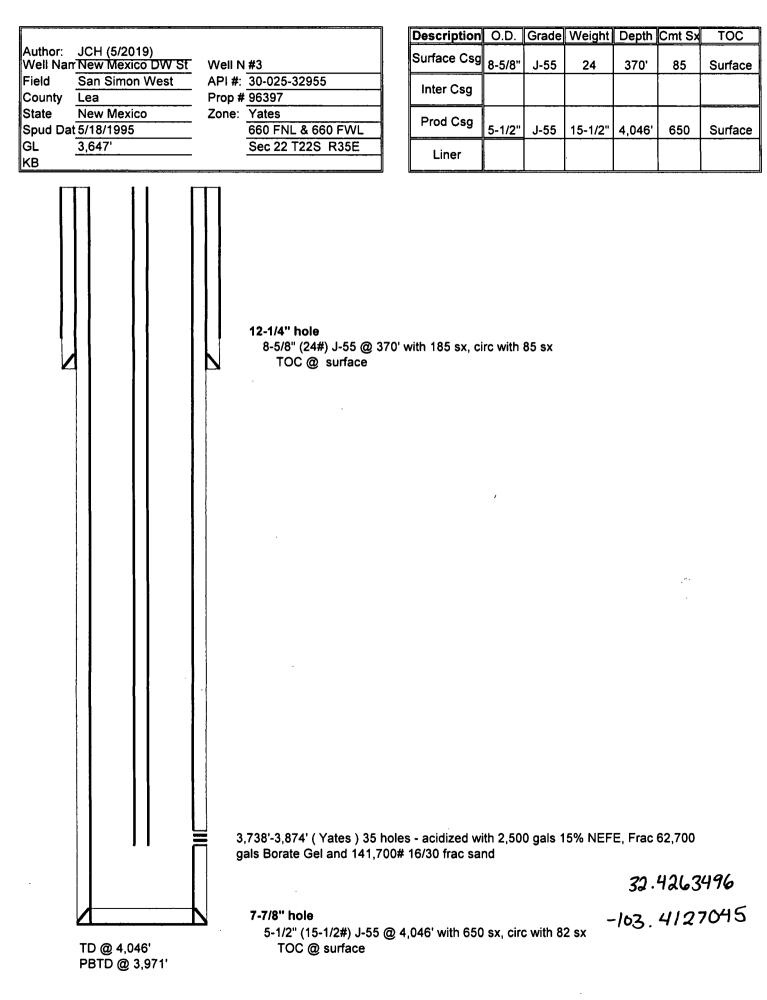
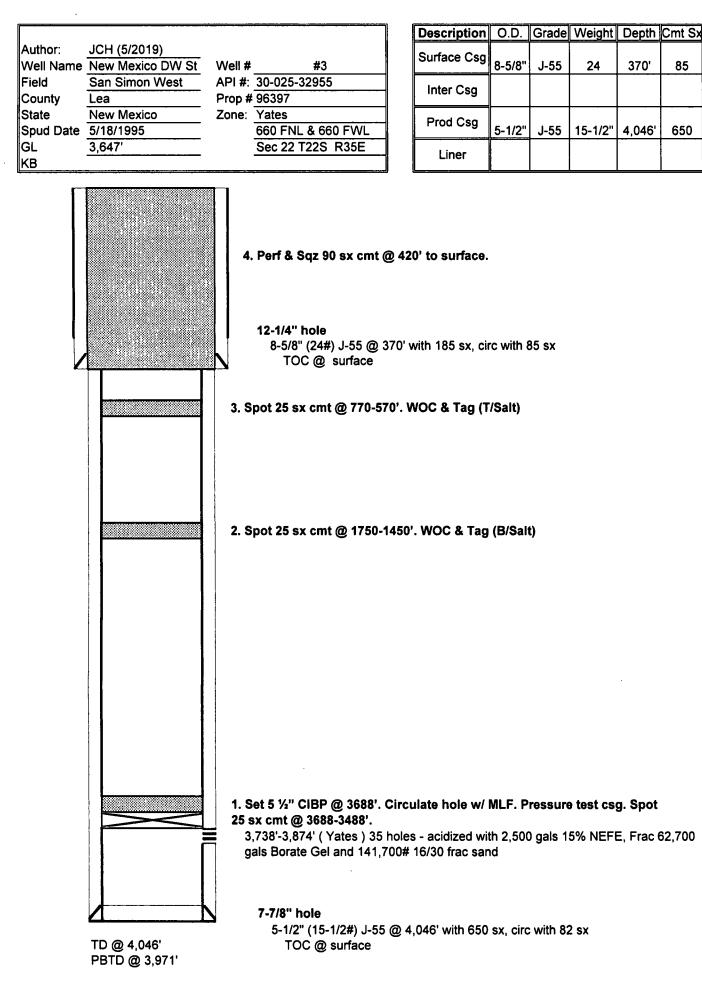
Office (175) 199-161.       Energy, Minerals and Natural Resources       Revised July 18, 2013         Data Life SN, Francis, Josephan Markov, Josephan	Office.       Converted by 18, 2013         Dates:       Converted by 18, 2013         Dates:       OLL CONSERVATION DIVUE         Dates:       OLL CONSERVATION DIVUE         Date:       Converted by 18, 2013         Date:       Converted by 20, 2013         Date:<	Submit 1 Copy To Appropriate District	State of New Mexi	CO	Form C-103		
Ideals Francis Dr. Josep, NM 8240         Demcell - (57) Metal SM 8240         B1 S First, Aresa, NM 8210         Dill CONSERVATION DIVUEN         112 SD 20 Suth St. Francisch.         Satta Fe, NM 8200         Dill CONSERVATION DIVUEN         112 SD 30 St. Francisch.         Satta Fe, NM 8200         Dill CONSERVATION DIVUEN         112 SD 30 St. Francisch.         Satta Fe, NM 8200         Demcal U- (693 476-360)         Demcal U- (693 476-360)         SUNDRY NOTICES AND REPORTS ON WOLLS         ON OUT US TWANK STO DULL ON DEPENDENT ON BARK.         POP TO LEASE WOR, USE "APELICATION FOR PERMIT" (FORM C-10) FOR SUCCE         St. Address of Operator         200 GOPartor         Unit Letter         1. Ope of Well: Oil Well G         Gas Well _ Other         2. Address of Operator         110. Pool name or Wildcat         Well Location         Unit Letter         1. Elevation (Show whether DR. RKB, RT. GR. acc)         Staff' CR         Staff' CR         I. Operator         2. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:         Staff' CR         Staff' CR	Image: Income Dr., Holle, NM 8820         Bill S. Finds S., Areis, NM 8820         Bill S. Finds S., Areis, NM 8210         DOW Rot mass N. Areis, NM 8710         Data S. The Roth C., Santa F., NM         State Dill S. Charles, NM 8710         Data S. The Roth C., Santa F., NM         State Dill S. Charles, NM 8710         Down State Dill, S., Santa F., NM         State Dill S. Charles, NM 8710         Down State Dill, S., Santa F., NM         State Dill S. Charles, NM 8710         Down State Dill, S., Santa F., NM         State Dill S., Santa F., NM <td></td> <td></td> <td></td> <td></td>						
Bit S. Finst. Areas. NM 8810       DIE CONSERVATION AUTONOMY         Bit S. Finst. Areas. NM 8810       Die CONSERVATION FOR TAILS IN TAILO BACK         Die Benet D., Same F., MM       Santa F.e, NM 84         Strate Oil & Gas Lase No.       Strate Oil & Gas Lase No.         Strate Oil & Gas Lase No.       9. State Oil & Gas Lase No.         Strate Oil & Gas Lase No.       9. OGRID Number         Strate Oil & Gas Lase No.       9. OGRID Number         Strate Oil & Gas Lase No.       9. OGRID Number         Strate Oil & Gas Lase No.       9. OGRID Number         Strate Oil & Gas Lase No.       9. OGRID Number         Strate Oil & Gas Lase No.       9. OGRID Number         Strate Oil & Gas Lase No.       11. Elevation (Show Mehr PR.RKB, RT.G.R. etc.)         A Well Location       11. Elevation (Show Mehr PR.RKB, RT.G.R. etc.)         Strate Oil Area or Wildest       11. Elevation (Show Mehr PR.RKB, RT.G.G. etc.)         Strate Oil Area or Strate Oil Area or Nildest       NoTICE OF INTENTION TO:         Strate Oil Area or	B) 15. First St. Areaia, M8210       DUL CONSERVATION       Site Conservation         B) 15. First St. Areaia, M8210       Santa Fe, NM 8200       Site Coll & Gas Lease No.         1220.5 St. Francis, M. State       Site Coll & Gas Lease No.       Site Coll & Gas Lease No.         1220.5 St. Francis, M. State       Site Coll & Gas Lease No.       Site Coll & Gas Lease No.         1220.5 St. Francis, M. State Coll & Gas Lease No.       Site Coll & Gas Lease No.       Site Coll & Gas Lease No.         1220.5 St. Francis, M. State Coll & Gas Well Coll & OT DEEPHO OR PLUG BACCOM.       The Well & Gas Well Coll Well & Gas Well Coll & OT DEEPHO OR PLUG BACCOM.       Not Mumber #3         1. Type of Well: Oil Well & Gas Well Coll & OT DEEPHO OR PLUG BACCOM.       B. Well Number #3       Not Well & Gas Well Coll Well & Gas Well Coll Well & Gas Well Coll & Gas Well & Other         2. Name of Operator       9. OGRID Number #3       Not Well & Gas Well & Other       Not Well & Gas Well & Other         3. Address of Operator       10. Elevation (Show whether DR RKR, TG, Ge, dec.)       Not Well & Gas Well & Other       Not Coll & Gas Lease No.         1. Use I Location       11. Elevation (Show whether DR RKR, TG, Ge, dec.)       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLIQ AND ABANDON & SUBSECOLEMIL WORK       Communication (Show Whether DR RKR, TG, Ge, dec.)         1. Decretor or completed operations. (Clearly state all pertinemt details, and give pertinemt detaic, including esti	1625 N. French Dr., Hobbs, NM 88240	Energy, winerals and wateral	WELL API N	JO.		
1220 South St. Francieur,       State E N. M.         1220 South St. Francieur,       6. State Oli & Gas Lase No.         1220 S. Francie D., Sama P., NM       9. State Fre.         1220 S. Francie D., Sama P., NM       9. State C. M.         1220 S. Francie D., Sama P., NM       9. State C. M.         9. State D. M. NOR PROFENSA TO DELL. OR TO DEPERSOR NO. VELLS       9. State OL & Gas Lase No.         1220 S. Francie D., Sama P., NM       10. Proceeding State C. M. Nor Proceeding C. M. Nor Procedic C. M. Nor Proceedic C. M. Nor Proceeding C. M. Nor	Damage 1-100 (34-4) as (M 8710)       1220 South St. Francetor,       St. Afractor, St.	811 S. First St., Artesia, NM 88210		5 Indicate T			
Data LP - (450) 476-3400       Salital PF, NM 400       Salital PF, NM 400         2735       Stem Coll & Gas Lease No.       0712         2735       Stem Coll & Gas Lease No.       17. Lease Name or Unit Agreement Name         2735       Stem Coll & Gas Lease No.       17. Lease Name or Unit Agreement Name         2735       Stem Coll & Gas Lease No.       17. Lease Name or Unit Agreement Name         2735       Stem Coll & Gas Lease No.       17. Lease Name or Unit Agreement Name         10000       Use "APPLicATION FOR PERMIT" (FORM C-101) FOR SUCCE       18. Well Number         12. Operator       10. Pool name or Wildcat       10. Pool name or Wildcat         3. Address of Operator       10. Pool name or Wildcat       10. Pool name or Wildcat         4. Well Location       11. Elevation (Show whether DR, RKB, RT, GR, etc.)       3647' GR         12. Check Appropriate Box to Indiate Nature of Notice, Report or Other Data       NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUS AND ABAPNON       CoMINGE DRILLING ORSIL       PAND A         13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent date, including estimated date       of starting any opposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of         13. Spot 25 scr mid (170-5/10. MOC & Tag (KSatt))       Spot 25 scr mid (17	Dament L + (35) 476-440       Salid PC, NM       Salid PC, NM       Salid PC, NM       State Oil & Gas Lease No.         D220 S. Transformed D. Salid E, NM       Salid PC, NM       The Maximum Control of Con						
Development       New Metrice DW State         Development       New Metrice DW State         Proposition       Gas Well         Other       New Metrice DW State         2: Name of Operator       0. GGRD Number         2: Name of Operator       10. Pool name of Wildcat         3: Address of Operator       10. Pool name of Wildcat         4: Well Location       11. Elevation (Show Whether DR. RKB, RT, GR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, GR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, GR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, GR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, GR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, GR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, OR, etc.)         3: Address of Operator       11. Elevation (Show Whether DR, RKB, RT, OR, etc.)         Setter Partice Part State	Domention use into both the information above is true and complete to the best of my knowledge and belief.       New Metrico JW State         Domention use into both the information above is true and complete to the best of my knowledge and belief.       New Metrico JW State         1. Type of Well: Oil Well @ Gas Well @ Other       29137         2. Nume of Operator       10. Pool name or Wildcat         000 W. Hillsol Ave, Midland, TX 79701       10. Pool name or Wildcat         4. Well Location       Wildcat 56632         1. Type of Well. Coll Well @ Gas Well @ Other       28. Range 35E         1. Check Appropriate Box to Indidate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PEMPORALL WORK    PLUG AND ABANDON @       CASING/CEMENT JOB         PULL OR ALTER CASING    MULTIPLE COMPL       OTHER:         010000 // State St	<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505 6. State Oil & Gas Lease No.				
Development are former for former former former former former for former former former fo	Domention use into both the information above is true and complete to the best of my knowledge and belief.       New Metrico JW State         Domention use into both the information above is true and complete to the best of my knowledge and belief.       New Metrico JW State         1. Type of Well: Oil Well @ Gas Well @ Other       29137         2. Nume of Operator       10. Pool name or Wildcat         000 W. Hillsol Ave, Midland, TX 79701       10. Pool name or Wildcat         4. Well Location       Wildcat 56632         1. Type of Well. Coll Well @ Gas Well @ Other       28. Range 35E         1. Check Appropriate Box to Indidate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PEMPORALL WORK    PLUG AND ABANDON @       CASING/CEMENT JOB         PULL OR ALTER CASING    MULTIPLE COMPL       OTHER:         010000 // State St	87505 PTU/12					
PROPOSES       Content and the information above is true and complete to the best of my knowledge and belief.         PROPOSES       Provide and the information above is true and complete to the best of my knowledge and belief.         Provide the information above is true and complete to the best of my knowledge and belief.	PROPORTING       Other       0. Main Market and the second	DIFFERENT RESERVOIR LISE "APPLICATION FOR DERMIT" (FORM C-101) FOR SUCH New Mexico DW State					
COC Operating, LLC       [223137]         10. Pool name or Wildcat       Wildcat 96032         4. Well Location       Wildcat 96032         4. Well Location       Inc. Sector 6         11. Elevation (Show whether DR, RKB, RT, GR, etc.)       State 96032         24. Well Location       Inc. Elevation (Show whether DR, RKB, RT, GR, etc.)       State 96032         25. State Report of Other Data       NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         26. State Report of Other Data       NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         27. State Report of Other Data       NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         28. State Report of Other Data       NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         29. State Report of Other Data       SUBSEQUENT REPORT OF:       SUBSEQUENT REPORT OF:         20. State Report of Other Data       MULI PLC or ALTERING CASING         COMMENCE DRILLING OPNS         P AND A         20. Obtended to Mark the Data of the Mark the Data of the State	COG Operating, LLC       229137         3. Address of Operator       IO. Pool name or Wildcat         600 W. Illinois Ave, Midland, TX 79701       Wildcat 96032         4. Well Location       Wildcat 96032         9. Well Location       Intervention         9. Well Location       Intervention         9. Well Location       Township 22S         9. Well Location       Township 22S         9. Section 6       Township 22S         9. Section 6       Township 22S         9. Section 6       Township 22S         9. Section 7       CR         9. Section 7       Section 8         9. Section 8       Township 22S         9. Section 7       Section 8         9. Section 8       Township 22S         9. Section 9       Section 8         9. Section 8       Public 8         9. Section 9       Section 8         9. Section 8       Section 8 <td>PROPOSALS.)</td> <td></td> <td>8. Well Num</td> <td>ber #3</td>	PROPOSALS.)		8. Well Num	ber #3		
3. Address of Operator       [10. Pool name or Wildcat         600 W. Illinois Ave, Midland, TX 79701       Wildcat 96032         4. Well Location       Wildcat 96032         Unit Letter_D:       660 feet from theN_ ine and660 feet from theW_ line         Section 6       Township 225 Range 35E       NMPM         County Lea       11. Elevation (Show whether DR, RKB, RT, GR, etc.)       SuBSEQUENT REPORT OF:         Settor 6       PLU Control CO F INTENTION TO:       SuBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON △       County Lea         COMMENCE DRILLING OPNS:       PAND A       County County Lea         PULL OR ALTER CASING       MULTIPLE COMPL       County	3. Address of Operator       10. Pool name or Wildcat         600 W. Illinois Ave, Midland, TX 79701       Wildcat 96032         4. Well Location       Unit Letter_D	2. Name of Operator			umber		
600 W. Illinois Ave, Midland, TX 79701       Wildcat 96032         4. Well Location       Unit Letter       D       : 660       feet from the       Wildcat 96032         4. Well Location       III. Elevation (Show whether DR, RKB, RT, GR, etc.)       : 660       feet from the       Wildcat 96032         4. Well Location       II. Elevation (Show whether DR, RKB, RT, GR, etc.)       : 660       feet from the       Wildcat 96032         4. Well Location       II. Elevation (Show whether DR, RKB, RT, GR, etc.)       : 660       feet from the       Wildcat 96032         5. Check Appropriate Box to Indidate Nature of Notice, Report or Other Data       NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON ©       CHANGE PLANS       COMMENCE DRILLING OPNS.]       P AND A         DOWNHOLE COMMINGLE       COMMENCE DRILLING OPNS.]       P AND A       Commence DRILLING OPNS.]       P AND A         DOWNHOLE COMMINGLE       OTHER:       OTHER:       OTHER:	600 W. Illinois Ave, Midland, TX 79701       Wildcat 96032         4. Well Location       Unite Letter_D_: 660 feet from theN_line and660 feet from theW_line         Section 6       Township 22S Range 35E       NMPM County Lea         11. Elevation (Show whether DR. RKB, RT, GR, etc.)       Section 6       County Lea         11. Elevation (Show whether DR. RKB, RT, GR, etc.)       Subsequent TepORT OF:       Subsequent TepORT OF:         PERFORM REMEDIAL WORK  > PLUG AND DANDON []       SUBSEQUENT REPORT OF:       RemEDIAL WORK  > ALTERING CASING           PULL OR ALTER CASING          Other Data       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK  > PLUG AND DANDON []       RemEDIAL WORK          ALTERING CASING            OWNHOLE COMMINGLE          Other Data       CASING/CEMENT JOB            DOWNHOLE COMMINGLE          OTHER:       OTHER:       III.         11. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of proposed completion or recompletion.       OTHER:       III.         12. Sept 25 s x cmt @ 170-517. WOC & Tag (T/Salt)       Spot 25 s x cmt @ 170-517. WOC & Tag (T/Salt)       Spot 25 s x cmt @ 170-517. WOC & Tag (T/Salt)         3. Sept 25 s x cmt @ 170-514.500. WOC & Tag (T/Salt)       Spot 25 s x cmt @ 170-517. WOC & Tag (T/Salt)       Spot 25 s x cmt @ 170-514.500. WOC & Tag (T/Salt)         3. Spot 25 s x cmt @ 170				ne or Wildcat		
Unit Letter       D       : 660       feet from the       M       line         Section       6       Township 22S       Range 35E       NMPM       County Lea         Section       11. Elevision (Show whether DR, RKB, RT, GR, etc.)       Section (Show whether DR, RKB, RT, GR, etc.)       Section (Show whether DR, RKB, RT, GR, etc.)         3647' GR       11. Elevision (Show whether DR, RKB, RT, GR, etc.)       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       CAMPORARILY ABANDON       ALTERING CASING         DULL OR ALTER CASING       MULTIPLE COMPIL       COMMENCE DRILLING OPNS.]       P AND A         DOWNHOLE COMMINGLE       OTHER:       OTHER:       OTHER:       Interview         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.       Sopt 25 ss cmt @ 710-570'. WOC & Tag (B/Salt)       Sopt 25 ss cmt @ 710-570'. WOC & Tag (B/Salt)         3. Spot 25 ss cmt @ 710-570'. WOC & Tag (B/Salt)       Sopt 25 ss cmt @ 710-570'. WOC & Tag (B/Salt)       Sopt 25 ss cmt @ 710-570'. WOC & Tag (B/Salt)       Sopt 25 ss cmt @ 710-570'. WOC & Tag (B/Salt)         4. Pert & Sag 90 ss cmt @ 710-570'. WOC & Tag (T/Salt)       S	Unit Letter D: 660 feet from the N line and 660 feet from the W line Section 6 Township 22S Range 35E NMPM County Lea II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show Whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show Whether DR RKB, RT, GR, etc.) 3647' GR II.Elevation (Show Work) SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUS AND A BANDON COMPLETE COMPLETION TO: PERFORM REMEDIAL WORK PLUS AND ABANDON COMPLETE COMPLETION TO: PERFORM REMEDIAL WORK PLUS AND ABANDON COMPLETE COMPLETION TO: PERFORM REMEDIAL WORK PLUS AND ABANDON COMPLETE COMPLETION TO: PERFORM REMEDIAL WORK PLUS AND ABANDON COMPLETE COMPLETION TO: PERFORM REMEDIAL WORK PLUS AND ABANDON COMPLETE COMPLETION TO: PERFORM REMEDIAL WORK PLUS AND ABANDON COMPLETE COMPLETION TO: POUL OR ALTER CASING MULTIPLE COMPLETION TO: POUL OR ALTER CASING MULTIPLE COMPLETION TO: II. Set 5 %' CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'. Spot 25 sx cmt @ 7150-1450'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 7150-1450'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 7150-1450'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 25 sx cmt @ 710-51'. WOC & Tag (R/Salt) Spot 2	•					
Section       County Lea         11. Elevation (Show whether DR, RKB, RT, GR, etc.)       11. Elevation (Show whether DR, RKB, RT, GR, etc.)         11. Elevation (Show whether DR, RKB, RT, GR, etc.)       11. Elevation (Show whether DR, RKB, RT, GR, etc.)         12. Check Appropriate Box to Indiate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REDIAL WORK       PLUB AND AB ABADONON         CHANGE PLANS       COMMENCE DRILLING OPNS.       P AND A         DOWNHOLE COMMINGLE       COMMENCE DRILLING OPNS.       P AND A         CLOSED-LOOP SYSTEM       OTHER:	Section 6       Township 22S       Range 35E       NMPM       County Lea         11. Elevation (Show whether DR, RKB, RT, GR, etc.)       3647' GR       11. Elevation (Show whether DR, RKB, RT, GR, etc.)       11. Elevation (Show whether DR, RKB, RT, GR, etc.)         12. Check Appropriate Box to Indidate Nature of Notice, Report or Other Data       NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       CHANGE PLANS       ALTERING CASING         PULL OR ALTER CASING       MULTIPLE COMPL       COMMENCE DRILLING OPNS       PAND A         ODWINHOLE COMMINGLE       MULTIPLE COMPL       CASING/CEMENT JOB       PAND A         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.       Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)       Spot 25 sx cmt @ 3688-3488'.       Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)       Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)       Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)       Spot 26 sx cmt @ 700-570'. WOC & Tag (B/Salt)       Spot 26 sx cmt @ 700-570'. WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 700-570'. WOC & T						
11. Elevation (Show whether DR, RKB, RT, GR, etc.)         3647' GR         12. Check Appropriate Box to Indidate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO         PERFORM REMEDIAL WORK         PLUG AND ABANDON         COMMENCE DATURE         PULL OR ALTER CASING         MULTIPLE COMPL         COMMENCE DOP SYSTEM         DOWNHOLE COMMINGLE         COSED-LOOP SYSTEM         OTHER:         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.         1. Set 5 ½" CIBP @ 3688.'Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.         2. Spot 25 sx cmt @ 770-570'. WOC & Tag (I/Salt)         3. Spot 25 sx cmt @ 770-570'. WOC & Tag (I/Salt)         4. Perf & Sqz 90 sx cmt @ 420' to surface.         5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.         4"d'a 4' above ground marKer         approx         ipud Date:         Rig Release Date:         Image:         Rig Release Date:         Image:         Image:         Rig Release Date:         Port & Sqz 90 siz cmt @ 420' to sur	11. Elevation (Show whether DR. RKB, RT. GR, etc.) 3647' GR         12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:         PERFORM REMEDIAL WORK       PLUG AND ABANDON         PULL OR ALTER CASING       MULTIPLE COMPL         COMMENCE Comminster       COMMENCE Colling OPNS.         PULL OR ALTER CASING       MULTIPLE COMPL         DOWNHOLE COMMINSLE       COMMENCE Colling OPNS.         CLOSED-LOOP SYSTEM       OTHER:         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.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Spot 25 sx cmt @ 70-570'. WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 70-570'. WOC & Tag (T/Salt)       . Spot 25 sx cmt @ 70-570'. WOC & Tag (T/Salt)         3. Spot 25 sx cmt @ 20' to surface.       Y"d' a 'Y' above ground marKer         Spud Date:       Rig Release Date:       Y"d' a 'Y' above ground marKer         SignATURE       Auderson       TITLE       Regulatory         Attaching       Anterney       DATE O7/22/20/9         Thereby certify that the information above is true and complete to the best of my knowledge and belief.       SignATURE       DATE O7/22/20/9 <td>Unit Letter D :</td> <td><u>660</u> feet from the <u>N</u>li</td> <td>ne and <u>660</u>feet from</td> <td>the <u>W</u>line</td>	Unit Letter D :	<u>660</u> feet from the <u>N</u> li	ne and <u>660</u> feet from	the <u>W</u> line		
3647' GR         12. Check Appropriate Box to Indigate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:         SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLUG AND BANDON CHANGE PLUG AND CHANGE PLUS AND A CASING/CEMENT JOB         DUL OR ALTER CASING MULTIPLE COMPL         OTHER:	3647' GR         12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:         SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON         OTHER:       ALTERNO CASING         PULL OR ALTER CASING       MULTIPLE COMPL         COMMENCE DRILLING OPNS.       PAND A         PULL OR ALTER CASING       MULTIPLE COMPL         COSED-LOOP SYSTEM       OTHER:         COSED-LOOP SYSTEM       OTHER:         OTHER:     <	Section 6	X		County Lea		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:         PERFORM REMEDIAL WORK       PLUG AND ABANDON         PERFORM REMEDIAL WORK       PLUG AND ABANDON         PERFORM REMEDIAL WORK       PLUG AND ABANDON         Character Casing       MULTIPLE COMPL         COMMENCE DRILLING OPNS       PANDA         PULL OR ALTER CASING       MULTIPLE COMPL         COMMENCE OF INITION ON CE ATAG       OTHER:         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.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Presure test csg. Spot 25 sx cmt @ 3688-3488'.         Spot 25 sx cmt @ 770-570'. WOC & Tag (T/Salt)         3. Spot 25 sx cmt @ 770-570'. WOC & Tag (T/Salt)         4. Perf & Sqz 90 sx cmt @ 420' to surface.         5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.         Hurd Date:         Rig Release Date:         Induct Addition above is true and complete to the best of my knowledge and belief.         KIGNATURE Advance Advence Completers         Intere Advance Advence Completers.         Intere Advance Advence Completers.         Preve prpint name Adving	12. Check Appropriate Box to Indiate Nature of Notice, Report or Other Data         NOTICE OF INTENTION TO:         PERFORM REMEDIAL WORK       PLUG AND ABANDON         PULLOR ALTER CASING       PLUG AND ABANDON         PULLOR ALTER CASING       MULTIPLE COMPL         COMENCE DRILLING OPNS       PAND A         PULLOR ALTER CASING       MULTIPLE COMPL         COMENCE DRILLING OPNS       PAND A         COMENCE COMMINGLE       COMENCE DRILLING OPNS         OTHER:       OTHER:         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.         1. Set 5 ¼" CIBP @ 3688". Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Spot 25 sx cmt @ 770-770. WOC & Tag (IV/Salt)         3. Spot 25 sx cmt @ 770-770. WOC & Tag (IV/Salt)       Spot 25 sx cmt @ 770-770. WOC & Tag (IV/Salt)         4. Perf & Sqz 90 sx cmt @ 420' to surface.       Y"d'a & Y'a bowe ground marker         Sput Date:       Rig Release Date:       Y"d'a & Y'a bowe ground marker         Sput Date:       Rig Release Date:       DATE_07/22/20/9         I hereby certify that the information above is true and complete to the best of my knowledge and belief.       SIGNATURE Along Anderson       TITLE Result fo	and the second sec		KB, RT, GR, etc.)			
NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       ALTERING CASING         TEMPORARLY ABANDON       CHANGE PLANS       COMMENCE DRILLING OPNS       P AND A         ULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB       P AND A         DOWNHOLE COMMINGLE       MULTIPLE COMPL       CASING/CEMENT JOB       P AND A         10. 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.         11. Set 5 ½" CIBP @ 3688". Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488".       So stort @ 20 to surface.         2. Spot 25 sx cmt @ 1750-1450". WOC & Tag (T/Salt)       P above ground/marker       So of X above ground/marker         4"d'a 4' above ground/marker       Y"d'a 4' above ground/marker       So of X above ground/marker         upud Date:       Rig Release Date:       DATE_07/22/20/9         hereby certify that the information above is true and complete to the best of my knowledge and belief.       State Use Onty         NGRATURE_Aling_1       Andeerson       TITLE Raguid fory       DATE_07/22/20/9         Vipe or print name Aborgon Andeerson       E-mail addres:       PHONE: 432 - 580-7/6/1         Yop born	NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       ALTERING CASING         TEMPORARILY ABANDON       CHANGE PLANS       OTHER:         PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB         DOWNHOLE COMMINGLE       OTHER:       Image: Commence Druling of the state of stating any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.         1. Set 5 ½" CIBP @ 3688". Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488".       Spot 25 sx cmt @ 770-570". WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 770-570". WOC & Tag (B/Salt)       Spot 25 sx cmt @ 770-570". WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 420" to surface.       State all pertinent details, and group of marker         9000000000000000000000000000000000000		5047 GR	···	· · · · · · · · · · · · · · · · · · ·		
NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       ALTERING CASING         TEMPORARLY ABANDON       CHANGE PLANS       COMMENCE DRILLING OPNS       P AND A         ULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB       P AND A         DOWNHOLE COMMINGLE       MULTIPLE COMPL       CASING/CEMENT JOB       P AND A         10. 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.         11. Set 5 ½" CIBP @ 3688". Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488".       So stort @ 20 to surface.         2. Spot 25 sx cmt @ 1750-1450". WOC & Tag (T/Salt)       P above ground/marker       So of X above ground/marker         4"d'a 4' above ground/marker       Y"d'a 4' above ground/marker       So of X above ground/marker         upud Date:       Rig Release Date:       DATE_07/22/20/9         hereby certify that the information above is true and complete to the best of my knowledge and belief.       State Use Onty         NGRATURE_Aling_1       Andeerson       TITLE Raguid fory       DATE_07/22/20/9         Vipe or print name Aborgon Andeerson       E-mail addres:       PHONE: 432 - 580-7/6/1         Yop born	NOTICE OF INTENTION TO:       SUBSEQUENT REPORT OF:         PERFORM REMEDIAL WORK       PLUG AND ABANDON       ALTERING CASING         TEMPORARILY ABANDON       CHANGE PLANS       OTHER:         PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB         DOWNHOLE COMMINGLE       OTHER:       Image: Commence Druling of the state of stating any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.         1. Set 5 ½" CIBP @ 3688". Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488".       Spot 25 sx cmt @ 770-570". WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 770-570". WOC & Tag (B/Salt)       Spot 25 sx cmt @ 770-570". WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 420" to surface.       State all pertinent details, and group of marker         9000000000000000000000000000000000000	12. Check	Appropriate Box to Indidate Nat	ure of Notice. Report or Of	her Data		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PAND A   CHANGE PLANS   OTHER:     OTHER:	PERFORM REMEDIAL WORK       PLUG AND ABANDON       REMEDIAL WORK       ALTERING CASING         TEMPORARLY ABANDON       CHANGE PLANS       COMMENCE DRILLING OPNS       PAND A         DULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB       PAND A         DOWNHOLE COMMINGLE       OTHER:       CASING/CEMENT JOB       CASING/CEMENT JOB         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.       I. Set 5 ¼" CIBP @ 3688". Circulate hole w/ MLF. Pressure test esg. Spot 25 sx cmt @ 3688-3488'.       Constant of the state of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.       I. Set 5 ¼" CIBP @ 3688". Circulate hole w/ MLF. Pressure test esg. Spot 25 sx cmt @ 3688-3488'.       Constant @ 1750-1450'. WOC & Tag (I/Sait)         3. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (I/Sait)       Spot 25 sx cmt @ 420' to surface.       Soft data 4' a bowe grouwd marker         9       Y"d'a 4' a bowe grouwd marker       Y"d'a 4' a bowe grouwd marker       Proposition         Spud Date:       Rig Release Date:       Date       Date       Date         I hereby certify that the information above is true and complete to the best of my knowledge and belief.       Date       07/22/20/9         SI		P.N.	•			
TEMPORARILY ABANDON       CHANGE PLANS       COMMENCE DRILLING OPNS.       PANDA         PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB       CASING/CEMENT JOB         DOWNHOLE COMMINGLE       OTHER:       OTHER:       Important of the second of the sec	TEMPORARILY ABANDON       CHANGE PLANS       COMMENCE DRILLING OPNS.       PANDA         PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB       CASING/CEMENT JOB         DOWNHOLE COMMINGLE       CLOSED-LOOP SYSTEM       OTHER:       Image: 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.         1.       Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Content of the system of 1750-1450'. WOC & Tag (B/Salt)         3.       Spot 25 sx cmt @ 770-570'. WOC & Tag (B/Salt)       Spot 25 sx cmt @ 770-570'. WOC & Tag (B/Salt)         4.       Perf & Sqz 90 sx cmt @ 420' to surface.       Surface.         5.       Cut off well head, verify cmt to surface, weld on Dry Hole Marker.       Y"d.'a 'f 'a bowt grouwd marker         Spud Date:       Rig Release Date:       Not prove and the structure of the best of my knowledge and belief.         SIGNATURE Abagail Amderson       TITLE Regula for y DATE_07/22/20/9       DATE_07/22/20/9         Type or print name Abagail Amderson       E-mail address:       PHONE: 432-580-7/6/1						
PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB         DOWNHOLE COMMINGLE       OTHER:       Image: Complete complet	PULL OR ALTER CASING       MULTIPLE COMPL       CASING/CEMENT JOB         DOWNHOLE COMMINGLE       OTHER:       OTHER:         CLOSED-LOOP SYSTEM       OTHER:       OTHER:         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.         1. Set 5 ¼" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Continue of the system of t						
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM CHER: CLOSED-LOOP SYSTEM CHER: CLOSED-LOOP SYSTEM CHER: CLOSED-LOOP SYSTEM CHERE: CLOSED CHERE:	DOWNHOLE COMMINGLE						
OTHER:       Image: Control of the constraint of the constrain	OTHER:       Image: 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.         1. Set 5 ½" CIBP @ 3688". Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488".       Content of the second of th		—				
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.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Soft 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)         3. Spot 25 sx cmt @ 170-570'. WOC & Tag (T/Salt)       Perf & Sq2 90 sx cmt @ 420' to surface.       Soft 25 sx cmt @ 3688-3488'.         5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.       4"d'a 4' above ground marker       Y"d'a 4' above ground marker         bpud Date:       Rig Release Date:       Date       Date         ispud Date:       Rig Release Date:       DATE 07/22/20/9         hereby certify that the information above is true and complete to the best of my knowledge and belief.       DATE 07/22/20/9         SIGNATURE Alingail Anderson       TITLE Regula fory       DATE 07/22/20/9         'ype or print name Abigoil Anderson       E-mail address:       PHONE: 432-580-7/61         'or State Use Only       Yerthen       TITLE Complinger 0 Micin A       DATE 7-24-/9	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.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Condition of the completion.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Condition of the completion.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Condition of the completion.         1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Condition of the completion.         3. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)       Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt)         4. Perf & Sqz 90 sx cmt @ 420' to surface.       Cut off well head, verify cmt to surface, weld on Dry Hole Marker.         4"d.a. 4' a bowe grouwd marker       Y"d.a. 4' a bowe grouwd marker         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       Anderson         Type or print name Abigoil       Anderson         For State Use Only       E-mail address:				_		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test esg. Spot 25 sx cmt @ 3688-3488'. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 25 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. WOC & Tag (T/Salt) Spot 26 sx cmt @ 1750-1450'. TITLE Racula for y marker Spot 27 spot	of starting any proposed work). SEE RULE 19.15.7.14 NMAČ. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.  2. Spot 25 sx cmt @ 1750-1450'. WOC & Tag (B/Salt)  3. Spot 25 sx cmt @ 770-570'. WOC & Tag (T/Salt)  4. Perf & Sqz 90 sx cmt @ 420' to surface.  5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.  4"d:a 4' a bowt ground marker  Spud Date:  I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE Abigoil Anderson  Type or print name Abigoil Anderson  E-mail address:  PHONE: 432 - 580-7/61				t dates including estimated date		
<ol> <li>Set 5 ½" CIBP @ 3688°. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488°.</li> <li>Spot 25 sx cmt @ 1750-1450°. WOC &amp; Tag (B/Salt)</li> <li>Spot 25 sx cmt @ 770-7570°. WOC &amp; Tag (T/Salt)</li> <li>Perf &amp; Sqz 90 sx cmt @ 420° to surface.</li> <li>Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d'a 4' a bowe ground marker</li> <li>4"d'a 4' a bowe ground marker</li> <li>Attacher</li> <li>Argenda data and complete to the best of my knowledge and belief.</li> <li>NGNATURE Alingal Anderson TITLE Regulatory DATE 07/23/20/9</li> <li>Option of the surface of the surface of the best of my knowledge and belief.</li> <li>NGNATURE Alingal Anderson E-mail address: PHONE: 432 - 580-7161</li> <li>State Use Only</li> <li>Approved BY: New Jorthen TITLE Compliance Officiance Officiance A Date 2-24-/9</li> </ol>	1. Set 5 ½" CIBP @ 3688'. Circulate hole w/ MLF. Pressure test csg. Spot 25 sx cmt @ 3688-3488'.       Control of the state of the sta	of starting any proposed w	ork). SEE RULE 19.15.7.14 NMAC.				
<ul> <li>2. Spot 25 sx cmt @ 1750-1450'. WOC &amp; Tag (B/Salt)</li> <li>3. Spot 25 sx cmt @ 770-570'. WOC &amp; Tag (T/Salt)</li> <li>4. Perf &amp; Sqz 90 sx cmt @ 420' to surface.</li> <li>5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d'a 4' a bowe ground marker</li> <li>5. Cut off well head, verify cmt to surface.</li> <li>5. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d'a 4' a bowe ground marker</li> <li>4"d'a 4' a bowe ground marker</li> <li>4"d'a 4' a bowe ground marker</li> <li>5. Cut off well head, verify cmt to surface.</li> <li>5. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head, verify cmt to surface.</li> <li>6. Cut off well head.</li> <li>7. Cut</li></ul>	<ul> <li>2. Spot 25 sx cmt @ 1750-1450'. WOC &amp; Tag (B/Salt)</li> <li>3. Spot 25 sx cmt @ 770-570'. WOC &amp; Tag (T/Salt)</li> <li>4. Perf &amp; Sqz 90 sx cmt @ 420' to surface.</li> <li>5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d: a 4' above ground marker</li> <li>4"d: a 4' above ground marker</li> <li>Spud Date:</li> <li>Rig Release Date:</li> <li>I hereby certify that the information above is true and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> </ul>	proposed completion or re	completion.	,			
<ul> <li>2. Spot 25 sx cmt @ 1750-1450'. WOC &amp; Tag (B/Salt)</li> <li>3. Spot 25 sx cmt @ 770-570'. WOC &amp; Tag (T/Salt)</li> <li>4. Perf &amp; Sqz 90 sx cmt @ 420' to surface.</li> <li>5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d'a 4' a bowe ground marker</li> <li>4"d'a 4' a bowe ground marker<td><ul> <li>2. Spot 25 sx cmt @ 1750-1450'. WOC &amp; Tag (B/Salt)</li> <li>3. Spot 25 sx cmt @ 770-570'. WOC &amp; Tag (T/Salt)</li> <li>4. Perf &amp; Sqz 90 sx cmt @ 420' to surface.</li> <li>5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d: a 4' above ground marker</li> <li>4"d: a 4' above ground marker</li> <li>Spud Date:</li> <li>Rig Release Date:</li> <li>I hereby certify that the information above is true and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> </ul></td><td>1. Set 5 ½" CIBP @ 36</td><td>88'. Circulate hole w/ MLF. Pressure</td><td>e test csg. Spot 25 sx cmt @ 36</td><td>88-3488'.</td></li></ul>	<ul> <li>2. Spot 25 sx cmt @ 1750-1450'. WOC &amp; Tag (B/Salt)</li> <li>3. Spot 25 sx cmt @ 770-570'. WOC &amp; Tag (T/Salt)</li> <li>4. Perf &amp; Sqz 90 sx cmt @ 420' to surface.</li> <li>5. Cut off well head, verify cmt to surface, weld on Dry Hole Marker.</li> <li>4"d: a 4' above ground marker</li> <li>4"d: a 4' above ground marker</li> <li>Spud Date:</li> <li>Rig Release Date:</li> <li>I hereby certify that the information above is true and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> <li>SIGNA TURE Above Amount of the strue and complete to the best of my knowledge and belief.</li> </ul>	1. Set 5 ½" CIBP @ 36	88'. Circulate hole w/ MLF. Pressure	e test csg. Spot 25 sx cmt @ 36	88-3488'.		
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: DATE 07/22/2019 For State Use Only PHONE: 432-580-7/61				ğ		
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: DATE 07/22/2019 For State Use Only PHONE: 432-580-7/61				d s		
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: DATE 07/22/2019 For State Use Only PHONE: 432-580-7/61	4. Perf & Sqz 90 sx cmt @ 420' to surface.					
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: DATE 07/22/2019 For State Use Only PHONE: 432-580-7/61	5. Cut off well nead, verify cmt to surface, weld on Dry Hole Marker.					
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only		7 <i>d</i> . a	· Y above ground m	arker of		
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only						
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: DHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: DATE 07/22/2019 For State Use Only PHONE: 432-580-7/61				<sup>1</sup> p		
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: DHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: DATE 07/22/2019 For State Use Only PHONE: 432-580-7/61	Γ	]				
hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: New Former TITLE Compliance Office A DATE 7-24-19	I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Abigoil Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigoil Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only	Spud Date:	Rig Release Date	:	V V		
SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: Newy Former TITLE Compliance Office A DATE 7-24-19	SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigail Anderson E-mail address: PHONE: 432-580-7161 For State Use Only						
SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Sype or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 For State Use Only APPROVED BY: Newy Former TITLE Compliance Office A DATE 7-24-19	SIGNATURE Abigail Anderson TITLE Regulatory DATE 07/22/2019 Type or print name Abigail Anderson E-mail address: PHONE: 432-580-7161 For State Use Only	I handler and if that the information	a channe is three and a supplete to the head		· · · · · · · · · · · · · · · · · · ·		
Type or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 <u>For State Use Only</u> APPROVED BY: Kenny Former TITLE Compliance Office A DATE 7-24-19	Type or print name Abigail Anderson E-mail address: PHONE: 432-580-7161 For State Use Only	I nereby certify that the information	above is true and complete to the best	of my knowledge and belief.			
Type or print name Abigail Anderson E-mail address: PHONE: 432-580-7/61 <u>For State Use Only</u> APPROVED BY: Kenny Former TITLE Compliance Office A DATE 7-24-19	Type or print name Abigail Anderson E-mail address: PHONE: 432-580-7161 For State Use Only			1 1	/ /		
APPROVED BY: Kenny Former TITLE Compliance Office A DATE 7-24-19	For State Use Only PHONE: 432-580-716	SIGNATURE Abigail			DATE 07/22/2019		
APPROVED BY: Kenny Former TITLE Compliance Office A DATE 7-24-19	For State Use Only J	Tyme or print name Al	abym	@bcmandassociates.	COM		
APPROVED BY: Kenny Forther TITLE Compliance Officer A DATE 7-24-19		For State Use Only	the source of the second secon		_ FRUNE: _432 380- /161		
APPROVED BY: Kerry Former TITLE Compliance Officer A DATE ]-24-19 Conditions of Approval (if any):				AL			
Conditions of Approval (if any):	APPROVED BY: remy Johnen TITLE Compliance Uffice A DATE 1-29-19	APPROVED BY: Kenny 3	other TITLE (omp	liance Office A	_DATE		
	Conditions of Approval (if any):	Conditions of Approval (if any):	U	ŰŸ			





TOC

Surface

Surface

## GENERAL CONDITIONS OF APPROVAL:

- 1) Insure all bradenheads have been exposed, identified, and valves are operational prior to rigging up on well.
- 2) Contact the appropriate NMOCD District Office no later than 24 hours prior to moving in and rigging up.
- 3) A copy of the approved C103 intent to P&A should be distributed to the onsite company and plugging representatives. <u>Approved procedures are</u> <u>good for a period of one year from approved date, unless otherwise</u> <u>specified on the C103 intent</u>. Approvals past this date will require the submission and approval of a new C103 intent.
- 4) A company representative is required to be present to witness all operations including setting CIBP's, circulation of mud laden fluids, perforating, squeezing or spotting cement plugs, tags, or any other operations approved on the C103 intent to P&A. Company representative should contact the NMOCD and report all operations.
- 5) Any changes that may be required during plugging operations should be approved by the NMOCD before proceeding.
- 6) A closed loop system is to be used for all plugging operations. Contents of the steel pits to be hauled to a NMOCD permitted disposal facility.
- 7) Mud laden fluids must be placed between all cement plugs mixed at 25 sacks of salt gel per 100 barrels of brine.
- All cement plugs will be 100' or 25 sacks cement, whichever is greater. Class
   'C' cement will be used above 7500' and Class 'H' below 7500'. Plugs should be no more than 3000' apart
- 9) Site remediation due within one year of well plugging completion.