

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
June 19, 2008

WELL API NO. 30-025-21944
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-3905
7. Lease Name or Unit Agreement Name Sunray B State
8. Well Number 1
9. OGRID Number 247692
10. Pool name or Wildcat North Bagley L. Penn

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator JAY MANAGEMENT COMPANY, LLC	
3. Address of Operator 1001 WEST LOOP SOUTH, SUITE 750 HOUSTON, TX 77027	
4. Well Location Unit Letter <u>K</u> : <u>1980</u> feet from the <u>SOUTH</u> line and <u>1980</u> feet from the <u>WEST</u> line Section <u>29</u> Township <u>11S</u> Range <u>33E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4307 KB	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: Temporary Abandon ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Well information:

April 1996- Discovery Operating Recomplete the Abo formation.

July 29 2019 Set CIBP @ 7400' and cap w/35' class C cement (Wireline)

September 13 2019 Pressure test for 32 minutes start from 580 psi end 570 psi (see attached chart) and temporary abandon.

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 Nhi Le TITLE Production Analyst DATE 09/27/2019

Type or print name Nhi Le E-mail address: nle@jaymgt.com PHONE: 713-621-6785

For State Use Only

APPROVED BY: Kerry Futer TITLE C.O. A DATE 10-7-19
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

JAY MANAGEMENT		Operator Name	API Number 30-025-21944-00-00
SUNRAY B STATE		Property Name	Well No. 001

Surface Location

UL - Lot K	Section 29	Township 11-S	Range 33-E	Feet from 1980	N/S Line S	Feet From 1980	E/W Line W	County LEA
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Well Status

TA'D Well <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJECTOR INJ SWD	PRODUCER OIL <input checked="" type="checkbox"/> GAS	DATE 9/16/19
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OBSERVED DATA

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

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

MIT TEST

Basic Energy Serv
Ser# DCM 99
Cal 9-13-19

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		27
Date: 9/16/19	Phone:	
Witness: KERRY FORTNER-OCD		

575-399-3221

