

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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

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| 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.) | | WELL API NO. 30-025-25616 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator Rice Operating Company | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 112 West Taylor, Hobbs, NM 88240 | | 7. Lease Name or Unit Agreement Name Blinebry Drinkard SWD |
| 4. Well Location Unit Letter N : 1150 feet from the South line and 2250 feet from the West line Section 18 Township 22S Range 37E NMPM County Lea | | 8. Well Number N-18 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3419' GL; 3424' KB | | 9. OGRID Number |
| | | 10. Pool name or Wildcat SWD; San Andres |

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 ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: MIT with Chart ☒

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.

Ran MIT with Chart Witnessed by _____ on _____

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 Foreman

DATE 8-21-20

Type or print name Israel Juarez

E-mail address: ijuarez@riceswd.com

PHONE: 575-393-9174

For State Use Only

APPROVED BY:

TITLE Co A

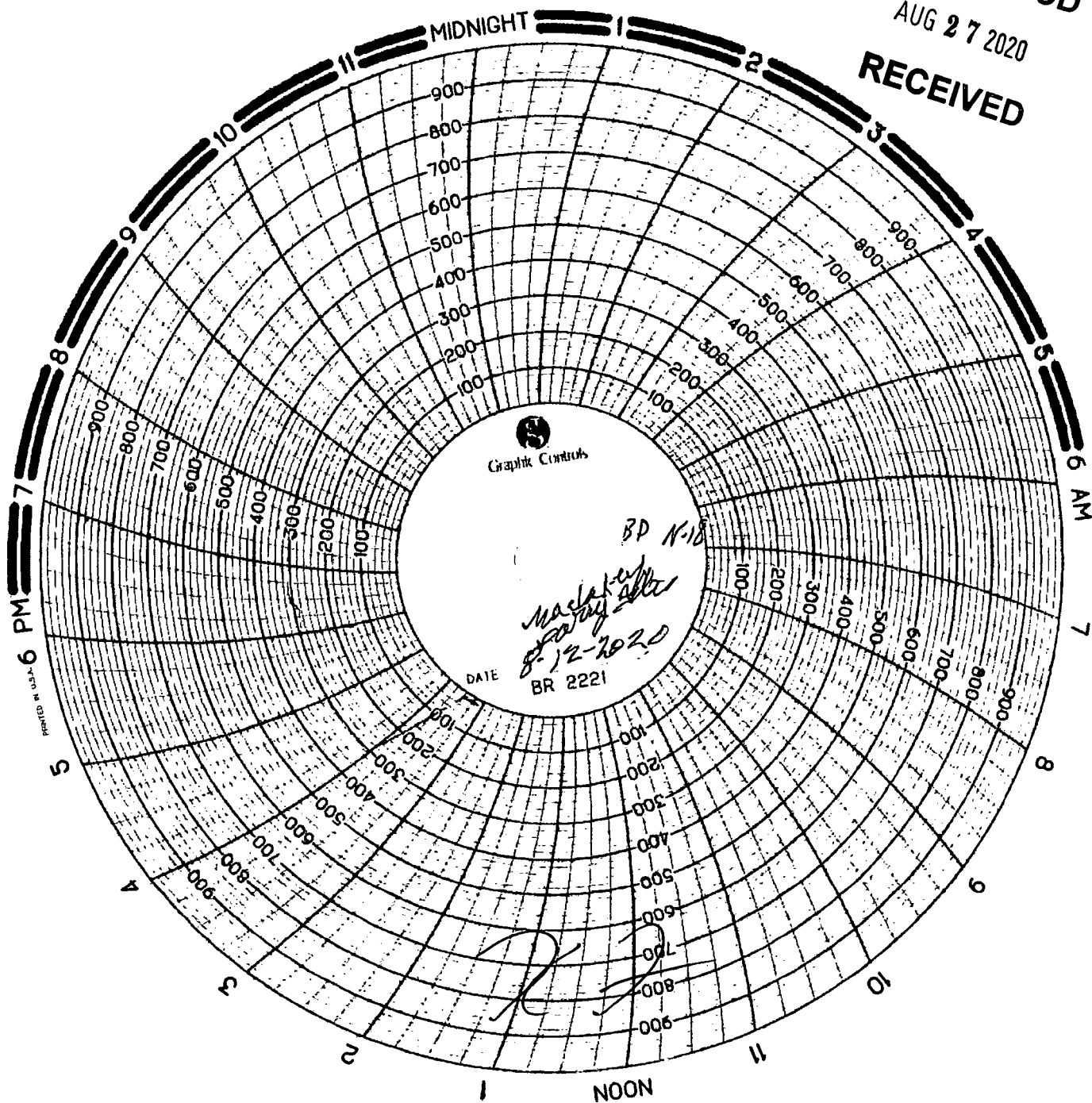
DATE 8-27-20

Conditions of Approval (if any)

HOBBS OCD

AUG 27 2020

RECEIVED



Graphic Controls

BD N-18

Mackay
8-12-2020
BR 2221

DATE

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