

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. 30-021-20691
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Libby Minerals LLC 2030 COM
8. Well Number 13-1-O
9. OGRID Number 370080
10. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas 640

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 checked="" type="checkbox"/> Other CO2	
2. Name of Operator Breitburn Operating LP	
3. Address of Operator 1111 Bagby Street, Suite 1600 Houston, Texas 77002	
4. Well Location Unit Letter O: 1170 feet from the South line and 1500 feet from the East line Section 13 Township 20N Range 30E NMPM Harding County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4568' 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: Completion <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.

October 25 – 27/ 2017:

Well completed as follows: RU WL and perforate the following intervals, 4 spf. : 1990' – 2003', 2020' – 2032', 2042' – 2055'. Monitor and record casing pressure.

TOOH w/fired guns. RIH w/gas guns and energize gas guns across 2042' – 2055' and 2020' – 2032' intervals. Record casing Pressure. **Do not stimulate upper perforations at 1990' – 2003'.** TOOH w/guns.

RIH w/ wireline, set packer @ 1980' RD WL.

ND WH and NU BOP. PU on/off tool on 2 7/8" FG tubing. Circulate packer fluid and latch on packer. Install 2 7/8", J-55 IPC tubing sub at surface. Land on a tubing hanger.

ND BOP and NU WH. RU pump truck and shear pump out plug.

Swab well until tubing capacity is recovered or until well starts flowing. DPU. RTP.

Spud Date: 10/17/2015

Rig Release Date: 10/22/2015

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

SIGNATURE 

TITLE Agent DATE : 06/30/2018

Type or print name Shelly Doescher E-mail address: shelly\_doescher@yahoo.com PHONE: 505-320-5682

**For State Use Only**

APPROVED BY: Will Jones TITLE Engineer DATE July 5, 2018

Conditions of Approval (if any):