

Santa Fe Main Office  
Phone: (505) 476-3441 Fax: (505) 476-3462  
General Information  
Phone: (505) 629-6116

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

Online Phone Directory Visit:  
<https://www.emnrd.nm.gov/ocd/contact-us/>

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-015-00196
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION WELL		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator ROUGHHOUSE OPERATING		6. State Oil & Gas Lease No.
3. Address of Operator Somewhere in Artesia, NM		7. Lease Name or Unit Agreement Name Atoka San Andres Unit
4. Well Location Unit Letter I                      2310' feet from the SOUTH line and 330' feet from the East line Section 14                      Township 18S      Range 26E      NMPM      Eddy      County		8. Well Number 144
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 330608
10. Pool name or Wildcat Atoka San Andres		

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: REPAIR WELL <input checked="" type="checkbox"/>		OTHER: <input 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.

WELL FAILED MIT ON 9/18/2024 with pressure on the annulus. Propose to:

Rig Up BOP, flow well back to tank.

TOH with tubing and packer. Pressure test tubing to 1000#, looking for a hole. Replace tubing and packer.

TIH with tubing and packer. Circulate hole with packer fluid. Set packer and pressure test.

Run MIT.

Spud Date: 03/11/1956

Rig Release Date: 05/17/1956

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

SIGNATURE  TITLE Production Reporting Manager DATE 10/8/2024

Type or print name Traci Folmar E-mail address: tfolmar@roughhouseoperating.com PHONE: 972-768-6426

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): \_\_\_\_\_

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720  
**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

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CONDITIONS

Action 390777

CONDITIONS

Operator: Roughhouse Operating, LLC 16051 Addison Road Addison, TX 75001	OGRID: 330608
	Action Number: 390777
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
kfortner	Notify NMOCD prior to MIRU Run MIT/BHT PWOT	10/9/2024