Submit 1 Copy To Appropriate District Office	Day M' - 1 Did D		Form C-103 Revised July 18, 2013	
<u>1015trict 1</u> – (575) 393-6161 Energy, Minerals and Natural Resources 625 N. French Dr., Hobbs, NM 88240		WELL API NO.		
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	(575) 748-1283 St., Artesia, NM 88210 (505) 334-6178 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		30-021-20593	
<u>District III</u> – (505) 334-6178			5. Indicate Type of Lease STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460			6. State Oil & Gas Lease	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name	
(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.)			FOUR WAY 2031	
1. Type of Well: Oil Well Gas Well X Other			8. Well Number 4-1	
2. Name of Operator WHITING OIL AND GAS CORPORATION			9. OGRID Number 25078	
3. Address of Operator 400 W ILLINOIS STE 1300 MIDLAND, TEXAS 79701			10. Pool name or Wildcat WILDCAT; SANTA ROSA (GAS)	
4. Well Location				
Unit Letter K: 1650 feet from the SOUTH line and 1980 feet from the WEST line				
Section 4 Township 20N Range 31E NMPM COUTNY: HARDING				
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 4600'				
Exemple of the second control of the second				
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 REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON			LLING OPNS. 🗌 🏢 P AND	Α . 🗆
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB				
DOWNHOLE COMMINGLE 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.				
proposed compression				
02/03/2014 - SPUD WELL 02/04/2014 – SET 8 5/8 J-55 24# CSG @ 717' W/450 SXS CMT, CMT CIRCULATED				
02/06/2014 – SET 5 ½ J-55 15.5# CSG @ 1365' W/300 SXS CMT, DID NOT CIRCULATE CMT				
02/06/2014 – RIG DOWN – MOVED OFF				
				•
	•			
02/03/2014		02/06/2014		
Spud Date: 02/03/2014	Rig Release Da	ie:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
$\sim 1/\sqrt{100}$				
SIGNATURE WWW WILLIAM TITLE: REGULATORY ANALYST DATE 02/10/2014				
Type or print name Kay Maddox E-mail address: kay.maddox@whiting.com PHONE: 432-686-6709				
APPROVED BY: APPROVED BY: TITLE DISTRICT SUPERVISOR DATE 2/13/2014				
APPROVED BY:	Partie TITLE	diriui dup	ERVIOUR _{Date} ,	-/13/2014
				

APPROVED BY: Conditions of Approval (if any):