

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

WELL API NO. 30-021-20681	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. 313900	
7. Lease Name or Unit Agreement Name DOROTEO 1927 15	
8. Well Number 03	
9. OGRID Number 25078	
10. Pool name or Wildcat WILDCAT:TUBB CO2 GAS POOL	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5598' GR	

**SUNDY 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 ☐ Gas Well ☐ Other ☒

2. Name of Operator  
WHITING OIL AND GAS CORPORATION

3. Address of Operator  
400 W ILLINOIS STE 1300 MIDLAND, TX 79701

4. Well Location  
Unit Letter J 1650 feet from the SOUTH line and 1650 feet from the EAST line  
Section 15 Township 19N Range 27E NMPM County HARDING

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 checked="" 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"/>			

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.

01/06/2016 RIH W/CIBP TAG FL LEVEL @1400', SET CIBP@ 2690'  
01/17/2016 TAG CIBP @ 2690', PRSS TST CSG TO 500 PSI, PMP 25 SXS CMT, 2690-2443', PMP 60 SXS CMT 827-234',  
PMP 10 SXS CMT 64'-SURF  
01/18/2016 CLEANED SUR FLOC, WELDED SURF PLATE & P&A MARKER

RE-SEEDING LOCATION WILL BE DONE DURING 2016 GROWING SEASON

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

*Kay Maddox*

TITLE: REGULATORY ANALYST DATE: 01/18/2016

Type or print name Kay Maddox E-mail address: [kay.Maddox@Whiting.com](mailto:kay.Maddox@Whiting.com) PHONE: 432-638-8475

For State Use Only

APPROVED BY:

*[Signature]*

TITLE

DIST IV

DATE

1/26/16

Conditions of Approval (if any):