Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103 October 13, 2009	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-40832	
District III	1220 South St. Francis Dr.		5. Indicate Type STATE	e of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			B-4575	
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 Gas Well Other			7. Lease Name or Unit Agreement Name	
			DELHI B STATE 8. Well Number 4	
			8. Well Number	· 4
2. Name of Operator			9. OGRID Number	
Alamo Permian Resources. LLC			274841	
3. Address of Operator			10. Pool name or Wildcat	
415 W. Wall Street, Suite 500, Midland, TX 79701		REDLAKE; QU	EEN-GRAYBURG-SA	
4. Well Location				
1		330 feet from the	W line	EDDA
Section 28 To	ownship 17S Range 28 11. Elevation (Show whether DR			y EDDY
	. 3688			
12. Check	Appropriate Box to Indicate N	Vature of Notice,	Report or Other	r Data
NOTICE OF IN	ITENTION TO:	SUB	SEQUENT RE	EPORT OF:
				ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR		P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMEN	TJOB 📙	
DOWNHOLE COMMINGLE				
OTHER:		OTHER:		
☐ Update to Authorization to Transport-Add Gas ☐ Transporter				sport-Add Gas
13. Describe proposed or completed	operations (Clearly state all pertin	ent details and give	nartinant dates ind	cluding estimated data of
stating any proposed work). SEE RU				
or recompletion.		1	_	
May 0, 2012				RECEIVED
May 9, 2013				MAY 15 2013
Well is now producing gas which w	ill be transported by DCP Midstrea	m, LP Transporter C	OGRID 036785	
I hereby certify that the information	above is true and complete to the h	est of my knowledg	e and belief	NMOCD ARTESIA
Thereby contract that the information	above is true and complete to the c	· · ·	e and benef	
Spud Date:	Dia Dalama D			
Spud Date.	Rig Release D	ate:		
				· · · · · · · · · · · · · · · · · · ·
I hereby certify that the information	above is true and complete to the b	est of my knowledg	e and belief.	
	\geq \downarrow \sim			
SIGNATURE	TITLE Regul	atory Affairs Coor	dinatorDA	ATE <u>5/9/2013</u>
Type or print name CARIE STOR	E-mail address:	cstoker@helmsoil.c	com PHONE: <u>432</u>	<u>-664-7659</u>
For State Use Only				_//.
APPROVED BY:	MOV TITLE /	575/K XXX	eruss) D	ATE 5/16/13
Conditions of Approval (if any):				