Office Office	State of New Mexico	Form C-103
<u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resou	rces Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		WELL API NO. 30-015-42069
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III - (505) 334-6178	1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	•	0.00.000
87505	CES AND DEPONTS ON WELLS	
	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement Name
	ATION FOR PERMIT" (FORM C-101) FOR SUCH	Klingensmith Fee
PROPOSALS.)	<u> </u>	8. Well Number 2H
	Gas Well  Other	
2. Name of Operator		9. OGRID Number
Fasken Oil and Ranch, Ltd.  3. Address of Operator		151416 10. Pool name or Wildcat
6101 Holiday Hill Road, Midland,	ΓΧ 70707	N. Seven Rivers; Glorieta-Yeso
·		
4. Well Location BHL: E	2310' North	330' West
Unit Letter <u>H</u> :	2190' feet from the North line a	
Section 24	Township 20S Range	24E NMPM County Eddy
The first transfer that the second	11. Elevation (Show whether DR, RKB, RT,	GR, etc.)
4.400 c. 前提供。	3576' GR	
12. Check A	Appropriate Box to Indicate Nature of I	Notice, Report or Other Data
NOTICE OF IN	TENTION TO:	CURCEOUENT REPORT OF
NOTICE OF IN	· · · · · · · · · · · · · · · · · · ·	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK		AL WORK ALTERING CASING
TEMPORARILY ABANDON		NCE DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING.	CEMENT JOB
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	OTHER:	
OTHER:		etails, and give pertinent dates, including estimated date
		Itiple Completions: Attach wellbore diagram of
proposed completion or reco		mpre comprenous. Action welloose diagram of
proposition and proposition an		
Fasken Oil and Ranch, Ltd. will be u	sing a closed loop pit system for the drilling a	and completion operations for the Klingensmith Fee No.
2Н.		
•		
		CRECEIVED
		RECEIVED
		FEB 13 2014
		LEB 1 0 501.
		NMOOD ARTESIA
Spud Date:	Rig Release Date:	NMOOD XXX
I hereby certify that the information a	above is true and complete to the best of my k	nowledge and belief.
	•	
()		
SIGNATURE Kin Dann	TITLE Regulate	ory Analyst DATE 2-11-2014
3	<u></u>	
Type or print name Kim Tys	son E-mail address: <u>ki</u>	imt@forl.com PHONE: 432-687-1777
For State Use Only	10	
APPROVED BY:	De TITLE DISTAS PA	DATE JAM
Conditions of Approval (if any):	- IIILE NIS, COR	DATEOGETICA
Conditions of Approval (II ally).		• •