

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

Form C-103  
 Revised July 18, 2013

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.) 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-41825
2. Name of Operator MEMORIAL PRODUCTION OPERATING LLC		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 500 DALLAS STREET, SUITE 1800 HOUSTON, TX 77001		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>J</u> : <u>1830</u> feet from the <u>S</u> line and <u>1950</u> feet from the <u>E</u> line Section <u>32</u> Township <u>16S</u> Range <u>31E</u> NMPM <u>EDDY</u> County		7. Lease Name or Unit Agreement Name NORTH SQUARE LAKE UNIT
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3907'		8. Well Number <u>203</u> 9. OGRID Number <u>303900</u> 10. Pool name or Wildcat SQUARE LAKE; GRAYBURG-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 checked="" 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: <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.

CANCEL REQUEST TO CHANGE TO INJECTION WELL, THIS WELL WAS COMPLETED AS AN OIL WELL.

NM OIL CONSERVATION  
 ARTESIA DISTRICT

SEP 24 2015

RECEIVED

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 [Signature] TITLE Sr. Regulatory Specialist DATE 09/24/2015

Type or print name Heather Dolphin E-mail address: heather.dolphin@memorialrd.com PHONE: 832-408-8603

For State Use Only

APPROVED BY: [Signature] TITLE Dist. Engineer DATE 9/24/2015  
 Conditions of Approval (if any):