

NM OIL CONSERVATION

Submit 3 Copies To Artesia District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 June 19, 2008

JAN 25 2016
 RECEIVED

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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.)		WELL API NO. 30-015-24531
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>DISPOSAL</u>		5. Indicate Type of Lease. STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>Buckeye DISPOSAL, LLC</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>P.O. 2724 Lubbock TX 79408</u>		7. Lease Name or Unit Agreement Name <u>N.M. STATE DU # 1</u>
4. Well Location Unit Letter <u>F</u> : <u>1673</u> feet from the <u>1673-N</u> line and <u>1809</u> feet from the <u>W</u> line Section <u>36</u> Township <u>22S</u> Range <u>27E</u> NMPM County <u>Eddy</u>		8. Well Number
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3075</u>		9. OGRID Number <u>222759</u>
		10. Pool name or Wildcat <u>SWD; Delaware 96100</u>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1-22
 1-22
 Found suspected hole in tubing shut well in
 START Blowing well down
 when pressure off of well
 Rig up pulling unit
 unit set packer pull well
 Test tubing
 Replace bad joints
 Run packer & tubing back in hole
 Test casing

NM OIL CONSERVATION
 ARTESIA DISTRICT
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(perfs: 4988-5620
 max press 1400 psi)

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 Jim Sayre TITLE MANAGER DATE 1-22-16
 Type or print name Jim SAYRE E-mail address: jim@restandardenergy.com PHONE: 575-390-6006
For State Use Only
 APPROVED BY Dr. J. Spenser TITLE Dr. J. Spenser DATE 1/25/16
 Conditions of Approval (if any):