

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. 30-015-24144 | |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> | |
| 6. State Oil & Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name Pardue 30 Com | |
| 8. Well Number 1 | |
| 9. OGRID Number 296278 | |
| 10. Pool name or Wildcat SWD, Bell Canyon-Cherry Canyon 96802 | |
| 4. Well Location Unit Letter E: 1,980 feet from the North line and 983 feet from the West line Section 30 Township 23-S Range 28-E NMPM County EDDY | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,089.3' GR | |

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: Conduct Step-Rate Pressure Test ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: ☐

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.

Intentions are to conduct a Step-Rate Test on the subject well on September 19, 2017 with pumping operations beginning at approximately 7 a.m.

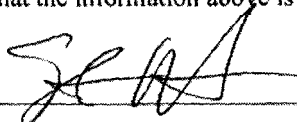
Results of the test will be submitted to Mr. Richard Inge and Mr. Phillip Goetze with the NMOD.

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



TITLE: Operations - Probity SWD, LLC

DATE 9/14/2017

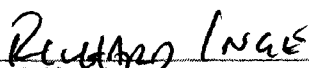
Type or print name Steven Montfort

E-mail address: smontfort@probityswd.com

PHONE: (432) 570-1122

For State Use Only

APPROVED BY:



TITLE

COMPLIANCE OFFICER

DATE

9/21/17