

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 August 1, 2011

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. 30-015-25969
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator REMNANT OIL OPERATING. LLC		6. State Oil & Gas Lease No. B-8318-134
3. Address of Operator PO BOX 5375, Midland, TX 79704		7. Lease Name or Unit Agreement Name SOUTH RED LAKE II UNIT
4. Well Location Unit Letter F : 1980 feet from the N line and 2310 feet from the W line Section 36 Township 17S Range 27E NMPM County EDDY		8. Well Number 047
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 370922
10. Pool name or Wildcat 5130; RED LAKE; QUEEN-GRAYBURG-SA		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input 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: RETURN TO PRODUCTION <input checked="" 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.

06/04/2018

Well was down with a stuck pump. Pumped fresh water down tubing. Got pump stroking and returned well to production.

RECEIVED

AUG 20 2018

I hereby certify that the information above is true and complete to the best of my knowledge and belief. DISTRICT II-ARTESIA O.C.D.

SIGNATURE Carie Stoker TITLE Regulatory Affairs Coordinator DATE: 08/16/2018

Type or print name Carie Stoker E-mail address: carie@stokeroilfield.com PHONE: 432.664.7659

APPROVED BY: [Signature] TITLE Staff Mgr DATE 8-24-18
 Conditions of Approval (if any):