

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

RECEIVED

State of New Mexico  
 Energy, Minerals and Natural Resources

"Amended Report"

Form C-103  
 Revised July 18, 2013

NOV 14 2019

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-005-64332
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 Spitfire
8. Well Number 5
9. OGRID Number 328666
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4025 GR

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
Tamaroa Operating, LLC

3. Address of Operator  
PO Box 866937, Plano Tx, 75086-6937

4. Well Location  
 Unit Letter N : 330 feet from the S line and 1650 feet from the W line  
 Section 2 Township 8S Range 28E NMPM Chaves County

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

<b>NOTICE OF INTENTION TO:</b> 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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

June 13, 2019: Spud Well: Drilled a 26" hole to 40' and ran 40' of 20" casing. Cement well with 50 sx ready mix from surface to 40'.

Spud Date: June 13, 2019

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 Consultant DATE 6/14/19

Type or print name Phelps White E-mail address: pwiv@zianet.com PHONE: 575 626 7660

**For State Use Only**

APPROVED BY: Signed By [Signature] TITLE ADP DATE 11/14/19

Conditions of Approval (if any):