

Submit 1 Copy To Appropriate District Office

State of New Mexico

Form C-103

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

Energy, Minerals and Natural Resources

Revised July 18, 2013

RECEIVED  
MAR 16 2020

OIL CONSERVATION DIVISION  
EMNRD-OCDARTESIA

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

WELL API NO. 30-015-45375
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name RED LAKE 32 STATE
8. Well Number 4H
9. OGRID Number 328947
10. Pool name or Wildcat RED LAKE; GLORIETA-YESO

**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  
SPUR ENERGY PARTNERS LLC

3. Address of Operator  
920 MEMORIAL CITY WAY, SUITE 1000, HOUSTON, TX 77024

4. Well Location  
Unit Letter P : 800 feet from the SOUTH line and 150 feet from the EAST line  
Section 32 Township 17S Range 27E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3500' GR

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 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: TEMPORARILY ABANDON <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.

1. Arrive on location on 3/10/2020
2. RU kill truck
3. Load production casing w/ 5 bbls FW
4. Pressure test casing to 560 psi for 30 minutes and recorded chart
5. Bled off pressure
6. RD kill truck

Missing Current + Proposed WBD

**Does Not Meet OCD Requirements**

Please find chart attached for your use.  
outstanding COV-well sign  
Missing NOI  
Missing Completion Paperwork

Spud Date: 12/17/2018 Rig Release Date: 4/23/2019

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Sarah Chapman TITLE REGULATORY DIRECTOR DATE 03/13/2020

Type or print name SARAH CHAPMAN E-mail address: SCHAPMAN@SPUREPLLC.COM PHONE: 832-930-8613

APPROVED BY: DENIED TITLE DENIED DATE GC 3/24/20  
Conditions of Approval (if any):