

Submit 3 Copies To Appropriate 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
May 27, 2004

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

WELL API NO. 30-015-35643
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 1625 STATE COM
8. Well Number 202
9. OGRID Number 218885
10. Pool name or Wildcat COTTONWOOD CREEK-WOLFCAMP

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator LCX ENERGY, LLC	7. Lease Name or Unit Agreement Name 1625 STATE COM
3. Address of Operator 110 N. MARIENFELD, STE. 200, MIDLAND, TX 79701	8. Well Number 202
4. Well Location Unit Letter <u>O</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>1880</u> feet from the <u>EAST</u> line Section <u>20</u> Township <u>16S</u> Range <u>25E</u> NMPM County <u>EDDY</u>	9. OGRID Number 218885
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3540' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

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

OTHER ☒ : Perf

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.

12/31/07 - 1/2/08 - N/D capping flange . N/U 5000# BOP , R/U Floor & Tongs. Test BOP to 1500 psi OK. M/U 4 3/4" bit on 2 7/8" tbg & RIH w/ bit to tag @ 8549'. R/U Swivel & Stripper head. Wash down to Float Collar @ 8558' and drill out float collar and 10' of cement to make PBTD @ 8568'. M/U 4 3/4" bit and 5 1/2" casing scrapper on 2 7/8" tbg and RIH w/ tbg and space out bottom @ 8557'. Tried to pressure test casing , pressured up to 3000 psi and broke down shoe joint , Pumping into well @ 2.5 bpm w/ 2200 psi. M/U 5 1/2" CIBP on tubing & RIH to 8555' set CIBP and test casing to 5000 psi OK. Pump 1000 gals Pickle Acid and 120 bbls water , shut down and retest casing to 5000 psi OK , Pump 5000 gals. 15% Acid w/ 2 x Inhibitors , spot w/ 16.4 bbls water . R/D Cudd equipment.

1/3/08 - M/U TCP Gun Assembly : Gun # 1 = 8555' 12 shots, 6' sub & 6 jts. Tbg. , Gun # 2 = 8344', 11 shots, 1-6' sub, 6 jts. Tbg., Gun # 3 = 8131', 10 shots, 1-6' sub, & 6 jts. Tbg., Gun # 4 = 7918', 9 shots, 1-6' sub & 6 jts. Tbg. Gun # 5 = 7705', 8 shots. RIH w/ TCP Gun Assembly and rest of tubing & space out tubing to top of CIBP @ 8555' Pressure up on guns to 3500 psi and fired guns , P/U rate and pressure to 21 bpm @ 2725 psi held rate & pressure through rest of acid job, ISDP=1095 psi, displaced a total of 130 bbls. Cont RIH w/ rest of tubing in derrick. POOH w/ 2 7/8" tubing and L/D tubing to pipe racks. R/D Floor & Tongs, N/D BOP, N/U Well Head Capping Flange.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Jenifer Sorley TITLE REGULATORY ANALYST DATE 1/28/08
Type or print name JENIFER SORLEY Email address: Jenifer@eeronline.com Telephone No. 432-262-4014

For State Use Only

FOR RECORDS ONLY

APPROVED BY: _____ TITLE _____ DATE FEB 01 2008
Conditions of Approval (if any): _____