

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 July 18, 2013

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

WELL API NO. 30-045-28653
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 Sunco Disposal
8. Well Number 1
9. OGRID Number 247130
10. Pool name or Wildcat SWD MV

**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 SWD Class 1

2. Name of Operator  
Agua Moss, LLC

3. Address of Operator  
PO Box 600 Farmington, NM 87499

4. Well Location  
 Unit Letter E : 1595 feet from the North line and 1005 feet from the West line  
 Section 2 Township 29N Range 12W NMPM County San Juan

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
5859' GL

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 checked="" 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"/>	RCVD FEB 26 '14 OIL CONS. DIV. DIST. 3 <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>		OTHER: <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input 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.

2/3/14 MIRU HWS Rig #12 RU pump/pit mix in with 640 sx barite, 9 cans of flowzan, for a total of 150 bbls 15.1 ppg w/ 54 vic  
 2/4/14 TBG 1300 PSIG, CSG 450 PSIG, MIX 10BBLs 3% KCL W/ 15 GAL HEC, PMP 6BBL Pull DWN TBG, displaced W/ 18 BBLs BARITE 15.1PPG MUD, Let well set for 15 MINS, still flowing back W/ 120# ON TBG, PMP a total of 21 BBLs TO KILL TBG, NDWH, PULLED 80K ON DONUT, stacked tbg string out, NU BOP/HYDRILL pressure test pipe ram & hydrill TO 1400#, PUT 1300# ON CSG, released on/off tool, killed well W/ 106.56 BBLs watching water returns until loss of circ, watch well no flow, LAY DOWN 135 JTS 2 7/8, swap tbg trailers out, TIH W/ NEW T-2 ON/OFF TOOL & 62 JTS NEW L-80 LINED TBG (1998.26)  
 2/5/14 Csg 0, Tbg 0, PU TIH w/ 73 jts 2 7/8" lined tbg, Latch on/off tool, MIRU Slick line, Run 1.51"6 GR to 4630', Run 1.906" GR to tag 1.87 F nipple @ 4281', Run & Set 1.87" plug in F nipple, RD Slick line, Attempt to get off on/off tool, Set down 5k tighten string and release on/off tool, TOH w tbg, Check seals on on/off tool ( good ) TIH w/ tbg checking connections, Role tbg/csg w/ 91 bbls produced wt, drain and secure well.  
 2/6/14 SICP 0#, SITP 0#, Pmpd 80bbls pkr fld dwn csg, Latched back on to pkr on/off tool, Tst csg to 500# for 30 mns held, NDBOP, Landed tbg w/ 8000# tension, NUWD, RDMO PU/Equipe, Flwd tbg back, started @ 1300#, good flow, picked up flow after 10 mins to very strong flow, Flowed back 120bbls total, SI tbg @ 420#, Job Complete, RD HWS Rig #12

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 Regulatory Compliance Specialist DATE 2/24/14  
 Type or print name Philana Thompson E-mail address: pthompson@merrion.bz PHONE: 505-486-1171

**For State Use Only**  
 APPROVED BY:  TITLE Deputy Oil & Gas Inspector, District #3 DATE 3/17/14  
 Conditions of Approval (if any): N