

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. 30-045-35476
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LG 5686 and LG 9804
7. Lease Name or Unit Agreement Name Good Times P36-2410 01H
8. Well Number 01H
9. OGRID Number 282327
10. Pool name or Wildcat Basin Mancos (97232)/South Bisti Gallup (5680)

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator Encana Oil & Gas (USA) Inc.
3. Address of Operator 370 17 th Street, Suite 1700, Denver, Colorado 80202
4. Well Location SHL: Unit Letter: <u>11341</u> feet from the SOUTH line and <u>255</u> feet from the EAST line Section: 36 Township 24N Range 10W NMPM San Juan County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6874' GR

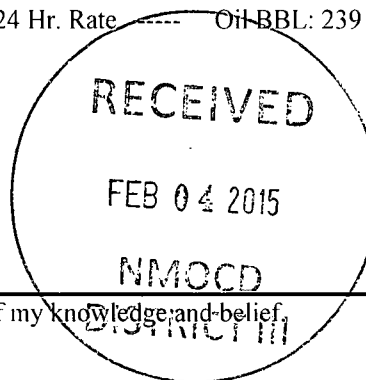
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: First 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.

Ready Date: 8/6/2014 Test Date: 08/16/2014 Hours Tested: 24hrs Test Production ----- Oil BBL: 239 Gas MCF: 379
Water BBL: 560 Oil Gravity: Unknown Gas Gravity: Unknown Production Method: Flowing

Choke Size: 64/64" Tubg. Press Flwg. SI: 180 Csg. Press: 775 24 Hr. Rate ----- Oil BBL: 239 Gas MCF: 379
Water BBL: 560 Gas/Oil Ratio: 1586 cuft/bbl



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

SIGNATURE Rosalie Thim TITLE Regulatory Analyst DATE JAN 30 2015

Type or print name Rosalie Thim E-mail address: rosalie.thim@enanca.com PHONE: 720-876-3740

For State Use Only

APPROVED BY [Signature] TITLE Line Manager II DATE 2-12-15
Conditions of Approval (if any):