Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I – (575) 393-6161	Energy, Minerals and Natu	ral Resources	Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	1 88210 OIL CONSERVATION DIVISION		30-039-82385	
District III - (505) 334-6178	1220 South St. Fran	ncis Dr.	5. Indicate Type of Lease STATE FEE □	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87	7505	6. State Oil & Gas Lease No.	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	541141 1 0, 1 1111 0 7		E-28924	
87505				
	ICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name	
	DSALS TO DRILL OR TO DEEPEN OR PLU [CATION FOR PERMIT" (FORM C-101) FO		0.1.00.511.	
PROPOSALS.)	,	AC SOCII	San Juan 29-5 Unit	
1. Type of Well: Oil Well Gas Well Other		8. Well Number		
2. Name of Operator		9. OGRID Number		
HILCORP ENERGY COMPANY		372171		
	3. Address of Operator		10. Pool name or Wildcat	
PO BOX 4700, FARMINGTON NM 87499 4. Well Location Unit Letter H 1650 feet from the North line and 990 feet		Gobernador PC/Blanco MV		
	CEO Cost Cost the North Property	1 000 6	A Country Dark Har	
Section 16	*	ange 5W	NMPM Rio Arriba County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
6709' GR				
		227		
12. Check	Appropriate Box to Indicate N	ature of Notice,	, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
	RFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORD MPORARILY ABANDON CHANGE PLANS COMMENCE DE L OR ALTER CASING MULTIPLE COMPL CASING/CEMEN			
DOWNHOLE COMMINGLE	MOLTIFLE COMPL	CASING/CEIVIEN	11 JOB	
CLOSED-LOOP SYSTEM				
	Recomplete	OTHER:		
		pertinent details, ar	nd give pertinent dates, including estimated dat	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of				
proposed completion or recompletion.				
Hilcorp Energy Company plans to recomplete the subject well and will use a closed loop system during recomplete operations.				
			NMOCD	
			MAR 0 3 2018	
			DISTRICT III	
0. 15				
Spud Date:	Rig Release Da	ite:		
I hereby certify that the information	above is true and complete to the be	est of my knowledg	ge and belief.	
-11-				
SIGNATURE	SIGNATURE TITLE Operations / Regulatory Technician – Sr. DATE 3/1/2018			
TITED OPPORTIONS / Regulatory Technician St. DATE 5/1/2016				
Type or print name Etta Trujillo E-mail address: ettrujillo@hilcorp.com PHONE: 505-324-5161				
For State Use Only Deputy Oil & Gas Inspector,				
Deputy On a state #3				
APPROVED BY: // FIMUL WELL WILL TITLE DATE 5				
Conditions of Approval (it any):				
	/ \			
	()			