

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

Form C-103
 Revised July 18, 2013

HOBBS OCD
 NOV 03 2016
RECEIVED

WELL API NO. 30-025-32907
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 State of New Mexico 35
8. Well Number 1
9. OGRID Number 14591
10. Pool name or Wildcat Kemnitz, Atoka Morrow, South (Gas)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4052' GR

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
Merit Energy Company

3. Address of Operator
13727 Noel Rd. Ste. 1200, Dallas, TX 75240

4. Well Location
 Unit Letter **G** : **1980** feet from the **North** line and **1980** feet from the **East** line
 Section **35** Township **16S** Range **34E** NMPM County **Lea**

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

NOTICE OF INTENTION TO PERFORM REMEDIAL WORK <input type="checkbox"/> F TEMPORARILY ABANDON <input type="checkbox"/> C PULL OR ALTER CASING <input type="checkbox"/> M DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: _____	INT TO PA P&A NR <u>Am-x</u> P&A R _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

- 10/04/16—MIRU.
- 10/05/16—POOH w/ 182 jts - RIH w/ 367 jts test tbg good Tag @ 11,854'.
- 10/06/16—Circ hole w/ MLF well did not pressure test, perf @ 10,200'.
- 10/07/16—Set pkr, well communicating call OCD ok'd to spot 50 sxs H cmt @ 10,250' to 9800'.
- 10/10/16—Well on slight vac, Tag @ 9378' work sinker bar down to 9450' call OCD Ok'd to perf @ 8600' well comm spot 50 sxs H @ 8671' to 8226'.
- 10/11/16—Tag @ 8465' perf @ 6000' press up call OCD - spot 50 sxs H @ 6053' to 5603' Tag @ 5680', perf @ 4753'
- 10/12/16—Sqz 40 sxs @ 4753' to 4600'.
- 10/13/16—Tag @ 4640' perf @ 2900' sqz 30 sxs to 2800' Tag @ 2710', perf @ 1600' sqz 30 sxs to 1500'.
- 10/14/16—Tag @ 1422' perf @ 454' circ 140 sxs cmt to surface RDMO.

Spud Date: 4/5/95 Rig Release Date:

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.

I hereby certify that the information above is true and complete to the best of

SIGNATURE  TITLE _____ P&A Tech _____ DATE **10/31/16**

Type or print name Chris Romero E-mail address: _____ PHONE: 432-563-3355

For State Use Only

APPROVED BY:  TITLE P.E.S. DATE 11/7/2016

Conditions of Approval (if any):