

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-44470
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator AMEREDEV OPERATING, LLC		6. State Oil & Gas Lease No. 320762
3. Address of Operator 5707 SOUTHWEST PARKWAY, BUILDING 1, STE. 275 AUSTIN, TX 78735		7. Lease Name or Unit Agreement Name RED BUD 25 36 32 STATE COM
4. Well Location Unit Letter <u>O</u> : <u>200</u> feet from the <u>SOUTH</u> line and <u>2250</u> feet from the <u>EAST</u> line Section <u>32</u> Township <u>25S</u> Range <u>36E</u> NMPM LEA County		8. Well Number 105H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3002' GL		9. OGRID Number 372224
10. Pool name or Wildcat JAL; WOLFCAMP, WEST		

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

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

06/05/2018 - Pump 1000 Sk, 440 bbls, 11.9ppg of 50/50PozC Blend with PF-044 5.000%, PF-020 10.00%, PF-153 0.20%, PF-029 0.125 lb/sk, PF-042 3.000 lb/sk, PF-045 0.400 lb/sk Lead Cement with 2.47 Yield, pump 300 Sk, 63 bbls, 15.6ppg of Class H Blend with PF-153 0.10% Tail Cement with 1.18 Yield. Displace with With 471 bbls fresh water, bump plug 500 psi over, held for 5 minutes, bled back 2 bbls, Floats Held (No returns during Cement Job)

06/05/2018 - Run Temperature Survey

06/05/2018 - Braden Head Squeeze 100% Annulus Capacity to TOC (SICP 425 psi)

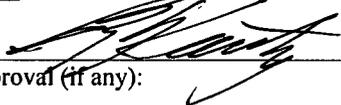
06/06/2018 - Test Casing to 1500 psi for 30 minutes. Test Good.

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 Operations Superintendent DATE 6/6/2018

Type or print name Zachary Boyd E-mail address: zboyd@ameredev.com PHONE: 737-300-4700  
 For State Use Only

APPROVED BY:  TITLE Petroleum Engineer DATE 07/02/18  
 Conditions of Approval (if any):