

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

Form C-103  
 Revised July 18, 2013

**RECEIVED**  
 AUG 21 2018

|                                                                                          |
|------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-025-12069                                                             |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                             |
| 7. Lease Name or Unit Agreement Name<br>WH Rhodes B Federal NCT 1                        |
| 8. Well Number 6                                                                         |
| 9. OGRID Number<br>371698                                                                |
| 10. Pool name or Wildcat<br>Rhodes Yates Seven Rivers                                    |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>2980 GL                            |

**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  
HPPC, Inc.

3. Address of Operator  
306 West Wall Suite 209; Midland, TX 79701

4. Well Location  
 Unit Letter I : 1980 feet from the South line and 660 feet from the East line  
 Section 27 Township 26S Range 37E NMPM Rhodes Field County Lea

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 type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input checked="" 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"/>       |                                          |
| DOWNHOLE COMMINGLE <input type="checkbox"/>             |                                           |                                                  |                                          |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>             |                                           |                                                  |                                          |
| OTHER: <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.

We hereby request permission to temporarily abandon this well. The well has 5 1/2 casing @ 3162 and 8 5/8 @ 1212'. Perforations in this well are at 3078-3300. Packer is set at 2984' with inhibited fluid in annulus. A successful MIT test was run on this well on 7/11/2018.

**Rule 19.15.25.14**  
 Set CIBP, RBP or Packer within 100 feet of uppermost perfs or open hole Pressure test to 500 psi for 30 minutes with a pressure drop of not greater than 10% over a 30 minute period

**Condition of Approval: notify OCD Hobbs office 24 hours prior of running MIT Test & Chart**

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 [Signature] TITLE Vice President DATE 8/03/2018

Type or print name Rajan Prasad E-mail address: rajan.prasad@hppcinc.com PHONE: 432-557-5067

**For State Use Only**  
 APPROVED BY: Majeed Brown TITLE AO/I DATE 8/22/2018  
 Conditions of Approval (if any): \_\_\_\_\_