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|--|---|---|---|-----------------------|-----------------------|-------------|--|---|--|---------------------------------------|--|--|--|---|---|---|--|---------|--------------|--|--|--|
| District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-8161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462 | State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505 | Form C-103 August 1, 2011 Permit 192634 WELL API NUMBER 30-025-41676 5. Indicate Type of Lease S 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name MERCHANT LIVESTOCK 30 STATE 8. Well Number 002H 9. OGRID Number 260511 10. Pool name or Wildcat | | | | | | | | | | | | | | | | | | | | |
| 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: O | | | | | | | | | | | | | | | | | | | | | | |
| 2. Name of Operator GMT EXPLORATION COMPANY LLC | | | | | | | | | | | | | | | | | | | | | | |
| 3. Address of Operator 1560 Broadway, Suite 2000, Denver, CO 80202 | | | | | | | | | | | | | | | | | | | | | | |
| 4. Well Location Unit Letter C : 33 feet from the N line and feet 2260 from the W line Section 30 Township 22S Range 35E NMPM County Lea | | | | | | | | | | | | | | | | | | | | | | |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3550 GR | | | | | | | | | | | | | | | | | | | | | | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ | | | | | | | | | | | | | | | | | | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table style="width:100%;"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE OF PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="2">Other: _____</td> <td colspan="2">Other: Perforations/Tubing <input checked="" type="checkbox"/></td> </tr> </table> | | | NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | | PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTER CASING <input type="checkbox"/> | TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE OF PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | | Other: _____ | | Other: Perforations/Tubing <input checked="" type="checkbox"/> | |
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| Other: _____ | | Other: Perforations/Tubing <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Perforations Report <div style="text-align: center;"> Perforations Pool: OJO CHISO;BONE SPRING, SOUTH, 97293 Location: N -30-22S-35E 33 N 2260 W </div> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TOP</td> <td style="width:10%;">BOT</td> <td style="width:10%;">Open Hole</td> <td style="width:10%;">Shots/ft</td> <td style="width:10%;">Shot Size</td> <td style="width:10%;">Material</td> <td style="width:10%;">Stimulation</td> <td style="width:10%;">Amount</td> </tr> <tr> <td>11914</td> <td>15719</td> <td>N</td> <td>3</td> <td>0.88</td> <td>Sand/Water</td> <td>Frac</td> <td>3088951</td> </tr> </table> <div style="text-align: center;"> Tubing </div> | | | TOP | BOT | Open Hole | Shots/ft | Shot Size | Material | Stimulation | Amount | 11914 | 15719 | N | 3 | 0.88 | Sand/Water | Frac | 3088951 | | | | |
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| 11914 | 15719 | N | 3 | 0.88 | Sand/Water | Frac | 3088951 | | | | | | | | | | | | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> . | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width:100%;"> <tr> <td style="width:20%;">SIGNATURE</td> <td style="width:30%;">Electronically Signed</td> <td style="width:20%;">TITLE</td> <td style="width:20%;">Pertotech</td> <td style="width:10%;">DATE</td> <td style="width:10%;">9/17/2014</td> </tr> <tr> <td>Type or print name</td> <td>Marissa Walters</td> <td>E-mail address</td> <td>mwalters@gmtexploration.com</td> <td>Telephone No.</td> <td>303-586-9275</td> </tr> </table> | | | SIGNATURE | Electronically Signed | TITLE | Pertotech | DATE | 9/17/2014 | Type or print name | Marissa Walters | E-mail address | mwalters@gmtexploration.com | Telephone No. | 303-586-9275 | | | | | | | | |
| SIGNATURE | Electronically Signed | TITLE | Pertotech | DATE | 9/17/2014 | | | | | | | | | | | | | | | | | |
| Type or print name | Marissa Walters | E-mail address | mwalters@gmtexploration.com | Telephone No. | 303-586-9275 | | | | | | | | | | | | | | | | | |
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State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
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Comments

Permit 192634

TUBING COMMENTS

| | |
|---|--------------------------|
| Operator: GMT EXPLORATION COMPANY LLC 1560 Broadway Denver, CO 80202 | OGRID: 260511 |
| | Permit Number: 192634 |
| | Permit Type: Tubing |

Comments

| Created By | Comment | Comment Date |
|------------|----------------|--------------|
| mwalters | no tubing run. | 9/17/2014 |