

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 227649																								
		WELL API NUMBER 30-015-23580																								
		5. Indicate Type of Lease P																								
		6. State Oil & Gas Lease No.																								
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.)		7. Lease Name or Unit Agreement Name ANN SWD																								
1. Type of Well: S		8. Well Number 001																								
2. Name of Operator PYOTE WELL SERVICE, LLC		9. OGRID Number 294873																								
3. Address of Operator 400 W. Illinois Ave, Ste 900, Midland, TX 79701		10. Pool name or Wildcat																								
4. Well Location Unit Letter <u>G</u> : <u>1980</u> feet from the <u>N</u> line and feet <u>1980</u> from the <u>E</u> line Section <u>18</u> Township <u>19S</u> Range <u>26E</u> NMPM County <u>Eddy</u>																										
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3423 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 NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____ SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <u>Perforations/Tubing</u> <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. REMEDIAL WORK: RAN 4" LINER FROM 7765-5678'. CEMENTED W/ 33 SX CLASS H. RAN 2-3/8" IPC TUBING FROM 7744-5678'. RAN 2-7/8" IPC TUBING FROM 5678-SURFACE. PACKER SET AT 7744'. INJECTION PERFS: 7790-7824' AND 8036-8100'. (BOTH HISTORICAL) WELL PRESSURE TESTED AND ORIGINAL CHART MAILED TO RICHARD INGE. COPIES OF CHART AND WBD WILL BE MAILED IN WITH SIGNED C-103.																										
Perforations <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>TOP</th> <th>BOT</th> <th>Open Hole</th> <th>Shots/ft</th> <th>Shot Size</th> <th>Material</th> <th>Stimulation</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>7790</td> <td>7824</td> <td>N</td> <td>0</td> <td>0</td> <td></td> <td></td> <td>0</td> </tr> <tr> <td>8036</td> <td>8100</td> <td>N</td> <td>0</td> <td>0</td> <td></td> <td>Acid</td> <td>0</td> </tr> </tbody> </table>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	7790	7824	N	0	0			0	8036	8100	N	0	0		Acid	0
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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"/> .																										
SIGNATURE _____ Type or print name <u>Electronically Signed</u> <u>Jenni M. Usher</u>		TITLE _____ E-mail address <u>jennimusher@gmail.com</u>																								
		DATE <u>10/19/2016</u> Telephone No. <u>512-820-8772</u>																								
For State Use Only: APPROVED BY: <u>Karen Sharp</u> TITLE <u>OCD Reviewer</u> DATE <u>10/20/2016 3:02:29 PM</u>																										

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State of New Mexico
Energy, Minerals and Natural Resources
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1220 S. St Francis Dr.
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Comments
 Permit 227649

TUBING COMMENTS

Operator: PYOTE WELL SERVICE, LLC 400 W. Illinois Ave Midland, TX 79701	OGRID: 294873
	Permit Number: 227649
	Permit Type: Tubing

Comments

Created By	Comment	Comment Date
jusher	WELL WAS PRESSURE TESTED ON 9/30/2016 AND THE CHART WAS MAILED TO RICHARD INGE. A COPY OF THE CHART AND THIS C-103 WILL BE MAILED IN.	10/19/2016
jusher	I TRIED TO UPLOAD THE CURRENT WELLBORE DIAGRAM AND CHART IN COMPRESSED .TIF FILES, BUT KEPT GETTING AN ERROR MESSAGE THAT THE FILES WERE STILL TOO LARGE. THEY WILL BE MAILED IN WITH THE SIGNED C-103 AND COPY OF THE PRESSURE CHART. THANK YOU!	10/19/2016
ksharp	Verified change of tubing size with Michael McMillan - ok	10/20/2016