

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

WELL API NO. 30-021-20666
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 313691
7. Lease Name or Unit Agreement Name DAHL 1928 06
8. Well Number 01
9. OGRID Number 25078
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS 640

**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  
WHITING OIL AND GAS CORPORATION

3. Address of Operator  
400 W ILLINOIS STE 1300 MIDLAND, TX 79701

4. Well Location  
 Unit Letter G 1660 feet from the NORTH line and 1660 feet from the EAST line  
 Section 6 Township 19N Range 28E NMPM County HARDING

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
5582' GR

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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" 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"/>			

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.

01/07/2016 RIH, TAG FL LEVEL @ 1130', SET CIBP @ 2665'  
 01/18/2016 RIH TAG CIBP @ 2665', PRESS TEST CSG TO 500 PSI, OK, PMP 25 SXS CMT 2665-2418',  
 PMP 60 SXS CMT 799-206', PMP 10 SXS 64'-SURF.  
 01/19/2016 CLEANED SURF LOC, WELDED SURF PLATE & P&A MARKER.

RE-SEEDING LOCATION WILL BE DONE DURING 2016 GROWING SEASON

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 Kay Maddox TITLE: REGULATORY ANALYST DATE: 01/25/16

Type or print name Kay Maddox E-mail address: [kay.Maddox@Whiting.com](mailto:kay.Maddox@Whiting.com) PHONE: 432-638-8475  
 For State Use Only

APPROVED BY: [Signature] TITLE DIST IV DATE 1/25/16  
 Conditions of Approval (if any):