

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

Form C-103
 Revised July 18, 2013

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		WELL API NO. 30-021-20632 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE 6. State Oil & Gas Lease No. 313331
2. Name of Operator WHITING OIL AND GAS CORPORATION		7. Lease Name or Unit Agreement Name STATE 2028 36 8. Well Number 01
3. Address of Operator 400 W ILLINOIS STE 1300 MIDLAND, TX 79701		9. OGRID Number 25078 10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE 640
4. Well Location Unit Letter J 1660 feet from the SOUTH line and 1749 feet from the EAST line Section 36 Township 20N Range 28E NMPM County HARDING		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5388' GR		

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 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"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <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.

02/25/2016 MIRU, 0 CSG PRESS, TAG PBD @ 2065', FL LEVEL 1367', PMP 100 SXS CMT @ 2065',
 02/26/2016 TAG TOC @ 2045', PMP 50 SXS @ 2045', TAG TOC @ 1764', PMP 100 SXS CMT
 02/27/2016 TAG TOC @ 1675', PMP 60 SXS CMT, TAG TOC @ 1669', PMP 50 SXS CMT
 02/28/2016 TAG TOC @ 1321', PRESS TST CSG TO 500#, HELD, ATTEMPT TO SQZ PERF @ 800', PERFS HELD,
 PMP 35 SXS CMT PLUG @ 858-655', SQZ PERF @ 500' W/150 SXS CMT, CIRC CMT UP 9 5/8 CSG TO SURF
 02/29/2016 WELDED SURF PLATE, & P&A MARKER, CLEAN SURF LOC, RE-CONTOUR LOCATION

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: 02/29/2016

Type or print name Kay Maddox E-mail address: kay.Maddox@Whiting.com PHONE: 432-638-8475

For State Use Only

APPROVED BY: Will J TITLE: DIST IV DATE: 3/24/16
 Conditions of Approval (if any):