Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-021-20587
District III - (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
(DO NOT USE THIS FORM FOR PRODIFFERENT RESERVOIR. USE "API	OTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A PLICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name LEWIS 1928
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🔀 Other	8. Well Number 2-1
2. Name of Operator		9. OGRID Number 25078
WHITING OIL & GAS CORP		
3. Address of Operator 400 W ILLINOIS STE 1300 M	IIDLAND, TEXAS 79701	10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS 640
4. Well Location		
Unit LetterJ: 2110 feet from the SOUTH line and 1650 feet from the EAST line		
Section 2	Township 19N Range 28E NMPM	CountyHARDING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 5469		
GR 3409		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING		
	Ä	
OTHER:	OTHER:	
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.		
12/18/2013 MOVED RIG BA	CK ON - LOGGING	~.
12/21/2013 SET PRODUCTION	ON CASING 5 ½" J-55, 15.5# @ 2879' W/600 SXS CM	T, DID NOT CIRCULATE
		Manager and American Control of the
Spud Date: 11/19/2013	Rig Release Date: 12/21/2013	6
		J J
T1 1 ('C d d ' C / d'		<u> </u>
I hereby certify that the informati	on above is true and complete to the best of my knowled	ge and beller.
SIGNATURE TITLE: REGULATORY SUPERVISOR DATE: 01/02/2014		
Type or print name KAY MADDOX E-mail address: kay.maddox@Whiting.com PHONE: 432-686-6709		
For State Use Only		
APPROVED BY: DISTRICT SUPERVISOR DATE 1/9/2014		
APPROVED BY: TITLE UIGIRIUI SUPERVISUR DATE 1/9/2014 Conditions of Approval (if any):		