| Submit 1 Copy To Appropriate District  | State of New Mexico   | Form C-103  |
|--|---|---|
| Office<br><u>District I</u> – (575) 393-6161   | Energy, Minerals and Natural Resources  | Revised August 1, 2011                            |
| 1625 N. French Dr., Hobbs, NM 88240<br><u>District II</u> – (575) 748-1283   |   | WELL API NO. 30-015-02206                         |
| 811 S. First St, Artesia, NM 88210   | OIL CONSERVATION DIVISION   | 5. Indicate Type of Lease                         |
| <u>District III</u> – (505) 334-6178<br>1000 Rio Brazos Rd., Aztec, NM 87410   | 1220 South St. Francis Dr.  | STATE S FEE                                       |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM   | Santa Fe, NM 87505  | 6. State Oil & Gas Lease No.                      |
| 87505  |   | 15-10716  |
|  | FICES AND REPORTS ON WELLS  | 7. Lease Name or Unit Agreement Name              |
| DIFFERENT RESERVOIR USE "APPL  | OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH | CAPAliNE -  |
| PROPOSALS.)  1. Type of Well: Oil Well   | Gas Well Other  | 8. Well Number                                    |
| 2. Name of Operator  | das weii Other  | 9. OGRID Number                                   |
| David G. Hammond   |   | 1.56206   |
| 3. Address of Operator   |   | 10. Pool name or Wildcat                          |
| PO Box 1538 Artesia NM 88211   |   | Millman TR  |
| 4. Well Location   | 270 1/  | 990 11/   |
| Unit Letter D: 350 feet from the line and 790 feet from the line   |   |   |
| Section 28   | Township 195 Range 28E  | NMPM County Eddy                                  |
|  | 11. Elevation (Show whether DR, RRD, RT, GR, etc.                                       | <i>'</i>  |
|  |   |   |
| 12. Check  | Appropriate Box to Indicate Nature of Notice,   | Report or Other Data                              |
| NOTICE OF I  | NTENTION TO: SUE  | SSEQUENT REPORT OF:                               |
| PERFORM REMEDIAL WORK  |   |   |
| TEMPORARILY ABANDON  |   | RILLING OPNS. P AND A                             |
| PULL OR ALTER CASING   | ] MULTIPLE COMPL ☐ ☐ CASING/CEMEN   | IT JOB 🔲  |
| DOWNHOLE COMMINGLE   |   |   |
| OTHER:   | OTHER:  | П   |
| 13. Describe proposed or com   | pleted operations. (Clearly state all pertinent details, ar                             | nd 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 re  | completion. All Misc, Equipm  | ent e TRASH ATCKED UP                             |
| NEW WELL SIGNS   | ON ORDER POR All WEIS   | ent & TRASH PICKED UP                             |
| INF HAS BEEN 1   | aid on Caroline laver   | and metal of                                      |
| INE HAS BEEN laid on Caroline lease, old Metal flow<br>INES HOUE BEEN REMOVED. ACCESS ROAD à location Have   |   |   |
| INES HOUE BEEN REMOVED. ACCESS ROAD & location HOUE  |   |   |
| BEEN GRADED à REPAIRED to Allow access for pulling Unit<br>hen Available. A NEW pamp HAS BEEN Built and Aund Jack  |   |   |
|  | A NEW DOWN HAS BEEN   | P. () Aux Z. 6                                    |
| went Available a were pump in when wall and ramp Jack  |   |   |
| urchased and wi  | 11 BE SET.  | ·   |
|  |   | RECEIVED  |
| <del></del>  |   |   |
| Spud Date:   | Rig Release Date:   | SEP 08 2011                                       |
|  |   |   |
|  |   | NMOCD ARTESIA                                     |
| I hereby certify that the information  | n above is true and complete to the best of my knowledge                                | ge and belief.                                    |
| //.1   |   |   |
| SIGNATURE (* /mi)  | face TITLE Owner/Operator   | DATE 9/6/2011                                     |
|  |   |   |
| Type or print name <u>David G. Hammond</u> E-mail address: <u>estefban2002@yahoo.com</u> PHONE: <u>575-308-7662</u> For State Use Only                       |   |   |
|  |   |   |
| APPROVED BY: 1) OUD SOLD STATE FIELD SUPPLIFICATION DATE 9-20-11   |   |   |
| APPROVED BY: DOUGH Way TITLE FIELD SUPPRVISOR DATE 9-20-11  Conditions of Approval (if any):  RETURN WELL TO Production or submit procedure to PAA by 1/6/12 |   |   |
| KETOTI MEIL TO LIBORICI OF SOMMIT LIDERONIE TO 1421 PA 1/6/17  |   |   |
| •  |   |   |