

Submit 1 Copy To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. 1st St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

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

WELL API NO.
30-015-35249

5. Indicate Type of Lease
STATE ☐ FEE ☐
6. State Oil & Gas Lease No.
SWD-1273
7. Lease Name or Unit Agreement Name
Cagney 28 Federal
8. Well Number 001

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

Mesquite SWD, Inc.

3. Address of Operator

P.O. Box 1479, Carlsbad, NM 88221

4. Well Location

Unit Letter P : 660 feet from the South line and 810 feet from the East line
Section 28 Township 17S Range 30E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3624' GL

9. OGRID Number 161968

10. Pool name or Wildcat
SWD; Wolfcamp 96135

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

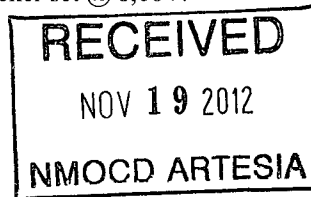
- REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

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.

SWD-1273. SWD commenced 11/13/2012. Injection into Perfs 8,212'-9,000'. Injection Packer set @ 8,164'.



11-27-12 w/o completion paperwork
of

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 Havenor

TITLE

Geologist

DATE

11/14/2012

Type or print name

Kay Havenor

E-mail address:

KHavenor@georesources.com

PHONE: 575-626-4518

For State Use Only

APPROVED BY:

R Wade

TITLE

Dist # Supervisor

DATE

11/20/2012

Conditions of Approval (if any):