Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources	evised August 1, 2011
District II - (575) 748-1283 OIL CONSERVATION DIVISION	005-64158
District III – (505) 334-6178 1220 South St. Francis Dr.	se FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460  Santa Fe, NM 87505  6. State Oil & Gas Leas	
1220 S. St. Francis Dr., Santa Fe, NM 87505 VO – 9252	
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  7. Lease Name or Unit Dawg	Agreement Name
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other  8. Well Number #1	
2. Name of Operator JALAPENO CORPORATION 9. OGRID Number 26	307
3. Address of Operator PO BOX 1608 10. Pool name or Wildo	
ALBUQUERQUE, NM 87103 WILDCAT; S.  4. Well Location	AN ANDRES
Unit Letter H : 2225 feet from the NORTH line and 704 feet from the EAST line	
	nty CHAVES
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3858 ' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☑ ALTE	T OF: RING CASING □
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB	
DOWNHOLE COMMINGLE	
OTHER: OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dat of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	e anagram or
1/3/14 Set 2109ft of 5.5" casing. Cemented casing with 100 sacks of	E class "C"
cement. Pumped all cement which was 110% excess and circulated cement to	
1574. Shut down and WOC.	
. [	
Spud Date:         6/3/2013         Rig Release Date:         2/10/2014	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
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SIGNATURE H, Lum VICE PRESIDENT DATE	4/23/14
Type or print name H.EMMONS YATES III E-mail address: eyates@jalapenocorp.com PHONE:	
For State Use Only	
APPROVED BY: TITLE DIST SOUND DATE 5/03/19 Conditions of Approval (if any):	