

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

Form C-103
 Revised August 1, 2011

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

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"/> XX Other SWD		WELL API NO. 30 015 25141
2. Name of Operator Basic Energy Services LP		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator P.O. Box 10460 Midland Texas 79702		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>E</u> : 2200 feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line Section <u>20</u> Township <u>23 S</u> Range <u>28 E</u> NMPM County <u>Eddy</u>		7. Lease Name or Unit Agreement Name Belco State
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		8. Well Number # 1 SWD
9. OGRID Number 246368		10. Pool name or Wildcat Delaware

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

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

9/8/15 Connection between Master Valve and tubing shows detrition and needs to be replaced
 Move in frac tanks and flow back until well can be killed with light mud or brine solution water
 Move in equipment and service unit to extract and inspect tubular.
 Replace AD-1 packer with Arrow set type with o/o tool and 2.25 profile nipple
 Replace all tubular that is bad or in question
 Run back in the hole with all needed equipment and set Pkr
 Circulate packer fluid then set back on o/o tool then blow out pump out plug.
 Pre test annular to 550psi
 Call district II Richard Inge for date of MIT
 Place back to injection.

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 David H. Alvarado TITLE SENM District Fluids Mgr. DATE 9/10/15

Type or print name David H. Alvarado E-mail address: david.alvarado@basicenergyservices.com PHONE: 575.746.2072
For State Use Only

APPROVED BY: Richard Inge TITLE COMPLIANCE OFFICER DATE 9/10/15
 Conditions of Approval (if any):