

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., 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, Mineral and Natural Resources  
ARTESIA DISTRICT  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
RECEIVED  
08 2016

Form C-103  
May 27, 2004

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-015-34140
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Clayton Williams Energy, Inc.		6. State Oil & Gas Lease No. VA-2115, VA-2116
3. Address of Operator 6 Desta Dr., Ste. 300 Midland, TX 79705		7. Lease Name or Unit Agreement Name STATE 16-13
4. Well Location Unit Letter M : 660 feet from the South line and 660 feet from the West line Section 16 Township 22S Range 22E NMPM County Eddy		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4364		9. OGRID Number 25706
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Rocky Arroyo
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

<b>NOTICE OF INTENTION TO:</b>		<b>* SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 5-31-16 - RIH w/4 1/2 CIBP and set @ 4400'. Circ well w/salt gel mud. Press. test 4 1/2 csg. Hold Good for 30min. @ 500psi.
- 5-31-16 - Spot 25sx cmt. Plug on 4 1/2 CIBP and WOC tag @ 4078'.
- 6-1-16 - Perf @ 1750', was not able to pump in 800-1000psi. Was advised by Bob (OCD) to drop down to 1800' and spot 25sx cmt. WOC tag @ 1676'.
- 6-1-16 - Perf @ 60', pump and sqz 35sx to surf.
- 6-1-16 - Top off plug w/10sx. Install dry hole marker. Job Complete.

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt  
of C-103 (Subsequent Report of Well Plugging)  
which may be found at OCD Web Page under  
Forms, www.emnrd.state.nm.us/oed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Betsy Luna TITLE Engineering Tech DATE 6-7-16

Type or print name Betsy Luna  
For State Use Only

E-mail address: bluna@claytonwilliams.com Telephone No. 432-682-6324

APPROVED BY: Robert J. Burt TITLE COMPLIANCE OFFICER DATE 6/8/2016  
Conditions of Approval (if any):