

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  
**ARTESIA DISTRICT**  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
 RECEIVED  
 JAN 29 2018

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-015-02644
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM 703-69
7. Lease Name or Unit Agreement Name Donnelly Kelly State
8. Well Number 2
9. OGRID Number 371484
10. Pool name or Wildcat ARTESIA; QN-GB-SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3608' GR

**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  
Rover Operating, LLC

3. Address of Operator  
17304 Preston Road, Suite 740, Dallas, TX 75252

4. Well Location  
 Unit Letter O : 330 feet from the south line and 2310 feet from the east line  
 Section 8 Township 18-S Range 28-E NMPM County Eddy

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 type="checkbox"/>	REMEDIAL WORK <input checked="" 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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Return to production <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.

- 11/3/17: MIRU; Unseat pump; TOH w/rods & pump; ND wellhead; Release TAC; NU BOP; Tbg stuck; Pump 60 bbl fresh water and work free; TOH tbg; TAC.
- 11/4/17: RU wireline; Run CBL; tagged # 2300'.
- 11/6/17: PU bit & tbg; RU reverse unit & clean to 2421'; circulate clean; TOH w/tbg; RD reverse unit; PU csg scraper; Make scraper run to PBTD.
- 11/7/17: RU WL; RIH w/GRJB; Tag 2309'; RD WL; TIH w/tbg; Tag 2421'; Pull bit above perfs and SDFN.
- 11/8/17: Finish TOH; PU CIBP & set @ 2400'; Could not set; TIH w/tbg & SN; ND BOP; NU wellhead; TIH rods & pump; Space out & hang on; Check PA; Clean location; RD; Return well to production.

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 Connie Swan TITLE Regulatory Administrator DATE 1/22/2018

Type or print name Connie Swan E-mail address: csswan@swanderlandok.com PHONE: (918) 621-6533

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Mgr DATE 1-29-18  
 Conditions of Approval (if any):