

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 July 18, 2013

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

WELL API NO	30-015-02744
5 Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6 State Oil & Gas Lease No	
7 Lease Name or Unit Agreement Name	HIGH LONESOME QUEEN UNIT
8 Well Number	#004
9 OGRID Number	371484
10 Pool name or Wildcat	HIGH LONESOME, QUEEN

**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 300, Dallas, TX 75252

4 Well Location  
 Unit Letter F 1980 feet from the N line and 1980 feet from the W line  
 Section 16 Township 16S Range 29E NMPM County Eddy

11 Elevation (Show whether DR, RKB, RT, GR, etc)  
 3672 GR

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

<b>NOTICE OF INTENTION TO</b> PERFORM REMEDIAL WORK <input 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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF</b> 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 RETURNED TO PRODUCTION <input checked="" type="checkbox"/>	
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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

3/15/2018 HSM over work stop authority MIRU Could not unseat pump, back off rods, POOH ND WH, release TAC, NU BOP POOH w/tbg, SI well SDFN

3/16/2018 HSM over pressure PU bit & scraper, TIH to 1700', testing tbg to 6000# POOH & LD bit, scraper SDFW

3/19/2018 HSM over traffic on location TIH w/RBP & set at 1700' Test casing to 500# POOH w/RBP TIH w/BHA to 1813' & circulated hole clean SDFN

3/20/2018 ND BOP, set TAC, NU WH RBIH w/rods, pump Space out and hang on Load tbg, clean loc, RDMO

Spud Date 6/17/1955

Rig Release Date

I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE Kent Preston TITLE Regulatory Contractor DATE 3/28/2018

Type or print name Kenneth Preston E-mail address kpreston@roverpetro.com PHONE 214-234-9115

**For State Use Only**

APPROVED BY [Signature] TITLE Staff Mgr DATE 4-23-18  
 Conditions of Approval (if any)