

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

RECEIVED
 State of New Mexico
 Energy, Minerals and Natural Resources
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
 JUN 14 2018
 DISTRICT II-ARTESIA O&G

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-015-21711
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator RAY WESTALL OPERATING, INC.		6. State Oil & Gas Lease No. 648
3. Address of Operator P.O. BOX 4, LOCO HILLS, NM 88255		7. Lease Name or Unit Agreement Name DHY A STATE
4. Well Location Unit Letter J : 1980' feet from the SOUTH line and 1650' feet from the EAST line. Section 15 Township 19S Range 28E NMPM County EDDY		8. Well Number 001
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3449'		9. OGRID Number 119305
10. Pool name or Wildcat SWD: CISCO-CANYON		

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

NOTICE OF INTENTION TO: 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"/>	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: CONVERT TO SWD
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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.

On 06/11/18 attempted to perform injection survey on well. Could not get past 13' from surface. We will have to flow back well, pull tbg and clear obstruction and then perform injection survey as required by SWD 1556 order. We are requesting an extension until 08/31/18 to get everything done.

6/8/17 INITIAL INJECTION
 6/15/18 - DELAY OK w/ OCSF-ENGINEERING.

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 René Hope TITLE BOOKKEEPER DATE 6/11/18

Type or print name RENE HOPE E-mail address: _____ PHONE: 575-677-2370

For State Use Only

APPROVED BY: Renardo Nunez TITLE COMPLIANCE OFFICER DATE 6/15/18
 Conditions of Approval (if any): _____