

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, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

CIS

Form C-103  
Revised March 25, 1999

WELL API NO.  
30-015-26622

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.  
28613

7. Lease Name or Unit Agreement Name:  
Caviness Paine

8. Well No. 4

9. Pool name or Wildcat  
East Loving Delaware

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  
Bird Creek, LLC

3. Address of Operator  
7134 S. Yale, #600 Tulsa OK 74136

4. Well Location  
Unit Letter J : 2310 feet from the South line and 1650 feet from the East line  
Section 15 Township 23 S Range 28 E NMPM Eddy County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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 recompilation.

Perf'd Delaware 5133-40' + 5142'-5155', acidize w/ 2500 gals.  
Frac'd Delaware w/ 20,000 gals gel + 27,000 # sand  
Put well on pump 5 BOPD, 6 MFPD, 65 BW.

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

SIGNATURE Robert W. Adley TITLE Regulatory Analyst DATE 2-13-02

Type or print name Robert W. Adley Telephone No. 918-496-2626  
(This space for State use)

Accepted for record  
FEB 19 2002  
only  
TITLE  
DATE