	Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
	Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources 5 N. French Dr., Hobbs, NM 88240 trict II – (575) 748-1283 S. First St., Artesia, NM 88210 trict III – (505) 334-6178 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		Revised August 1, 2011	
	1625 N. French Dr., Hobbs, NM 88240 District II = (575) 748-1283			WELL API NO. 30-039-31134	
	811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease	
	District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410			STATE 🛛 FEE 🗌	
	<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
	1220 S. St Francis Dr., Santa Fe, NM 87505			E 9055	
	SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name				
	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			Escrito A36-2407	
	PROPOSALS.)			8. Well Number	
Ì	1. Type of Well: Oil Well	Well Gas Well Other		01H	
Ì	2. Name of Operator			9. OGRID Number	
ļ	Encana Oil & Gas (USA) Inc.		282327		
	3. Address of Operator 370 17 th Street, Suite 1700 Denver	r CO 80202		10. Pool name or Wildcat Escrito Gallup (Associated)	
	4. Well Location				
SHL: Unit Letter A: <u>614</u> feet from the <u>NORTH</u> line and <u>251</u> feet from the <u>EAST</u> line					
BHL: Unit Letter D: <u>614</u> feet from the <u>NORTH</u> line and <u>330</u> feet from the <u>WEST</u> line					
Section 36 Township 24N Range 7W NMPM Rio Arriba County					
Ì	11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
		6710'	KB	· · · · · · · · · · · · · · · · · · ·	
	12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
	NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
	PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A					
	PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMENT	JOB 🛛	
	DOWNHOLE COMMINGLE OTHER:		OTHER:	П	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dates)					
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of					
	proposed completion or recompletion.				
				OIL CONS. DIV.	
Well spud 10/18/12. DIST. 3					
Set surface casing string and cemented 10/18/12. Gelled freshwater system.					
Hole diameter: 12.25", casing diameter: 9.625", casing weight and grade: 36# J55 LTC. Depth of 12.25" hole from 0 to 525'. Casing set from surface to 517'.					
	On 10/18/12 numped 207 sks of Tvi	ne III Cement + 1% CaCl2 + 0.25# C	Tello Flake + 0.2% I	FL-52A Mixed at 14 6ppg Vield 1.38 cuft/sk	
On 10/18/12 pumped 207 sks of Type III Cement + 1% CaCl2 + 0.25# Cello Flake + 0.2% FL-52A. Mixed at 14.6ppg. Yield 1.38 cuft/sk. 2 bbls circ to surface. WOC 8 hours for surface casing.					
Float collar at 471'. TOC at surface and BOC at 517'.					
Tested BOP on 10/19/12 to 3000psi for 30 minutes. No pressure drop. Tested casing on 10/19/12 to 1500psi for 30 minutes. No pressure					
,	drop.				
	Started drilling out cement at 454'T	VD/MD on 10/19/12.			
Spud Date: 10/18/12 Rig Release Date:					
i	Spud Date: 10/18/12	Rig Re	elease Date:		
	Spud Date: 10/18/12	Rig Re	elease Date:		
i	Spud Date: 10/18/12	Rig Re	elease Date:		
	·			and belief.	
•	I hereby certify that the information	above is true and complete to the be	est of my knowledge	/ /	
	I hereby certify that the information SIGNATURE	above is true and complete to the be	est of my knowledge ering Technologist	DATE 10/25/12	
	I hereby certify that the information SIGNATURE / Manda (Type or print hame Amanda Cavoto	above is true and complete to the be TITLE Engineer E-mail address: amanda.cavoto@e	est of my knowledge ering Technologist encana.com	DATE 10/25-/12_ PHONE: 720-876-3437	
	I hereby certify that the information SIGNATURE Manda (Type or print hame Amanda Cavoto For State Use Only	above is true and complete to the be TITLE Engineer E-mail address: amanda.cavoto@e	est of my knowledge ering Technologist encana.com outy Oil & Gas	DATE 10/25-/12_ PHONE: 720-876-3437	
	I hereby certify that the information SIGNATURE / Manda (Type or print hame Amanda Cavoto	above is true and complete to the be TITLE Engineer E-mail address: amanda.cavoto@e	est of my knowledge ering Technologist encana.com	DATE 10/25-/12 PHONE: 720-876-3437	