Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240	-		WELL API NO.	
<u>District II</u> (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-021-20628	
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		o. State On & Gas Lease	NO.	
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			GALVESTON 1928	
PROPOSALS.)			8. Well Number	
1. Type of Well: Oil Well Gas Well Other			011	
2. Name of Operator			9. OGRID Number 25078	
WHITING OIL AND GAS CORPORATION				
3. Address of Operator			10. Pool name or Wildcat	
400 W ILLINOIS STE 1300 MIDLAND, TX 79701			BRAVO DOME CARBON DIOXIDE GAS 640	
4. Well Location				
	rom the SOUTH line and 1750 feet			
Section 1 Township 19N Range 28E NMPM County HARDING				
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5412' GR				
12 Check	Appropriate Box to Indicate N	ature of Notice	Report or Other Data	
12. Check	ippropriate Box to marcute 14		report of Other Butt	
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 CLOSED-LOOP SYSTEM				
OTHER:		OTHER:		. П
	oleted operations. (Clearly state all p	pertinent details, an	d give pertinent dates, inclu	ding estimated date
	ork). SEE RULE 19.15.7.14 NMAC	C. For Multiple Cor		
proposed completion or re-	completion.			ar 3
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06/22/2014 SPUD WELL			OIL CONS. DIV DIST. 3	
			OIL 9 5 2014	
			JUN B	
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Spud Date: 06/22/2014	Rig Release Da	ite:		٠.
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I hereby certify that the information	above is true and complete to the be	est of my knowledg	e and belief.	
-1/2				
SIGNATURE YMM N	TITLE: REGI	II ATORY ANAL'	YST DATE: 06/23/2014	
SIGNATURE	THEE. REGG	DENIORI ANAL	. 51 DITTE, 00/25/2014	
Type or print name Kay Maddox	E-mail address: <u>kay.Maddox@Whit</u> i	ing.com PHONE:	432-638-8475	
For State Use Only				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	711		DATE 7	17/16
APPROVED BY: Dand JA	TITLE		DATE/	1111-1
Conditions of Approval (if any):	PY			