

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 Rs., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103

Jun 19, 2008

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

WELL API NO. 30-039-29541
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-10037-59
7. Lease Name or Unit Agreement Name SAN JUAN 30-6 UNIT
8. Well Number 429S
9. OGRID Number 372171
10. Pool name or Wildcat FRC - BASIN CB::FRUITLAND COAL

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
HILCORP ENERGY COMPANY

3. Address of Operator
P.O. Box 4700 Farmington, NM 87499

4. Well Location
 Unit Letter J Footage **1635' FSL & 1610' FEL**
 Section 32 Township **030N** Range **007W** **RIO ARRIBA COUNTY**

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

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/> - Redelivery	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Notes: WELL WAS SHUT IN FOR MORE THAN 90 DAYS DUE TO DOWNHOLE ISSUE. RETURNED TO PRODUCTION.

TP: 0 CP: 60 Initial MCF: 6
 Meter No.: 120693-01
 Gas Co.: TEP
 Proj Type.: REDELIVERY
 Spud Date: 7/15/2005 Rig Released Date: 9/18/17

OIL CONS. DIV DIST. 3
 SEP 20 2017

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

SIGNATURE Tammy Jones TITLE Operations/Regulatory Tech - Sr. DATE 9/19/17
 Type or print name Tammy Jones E-mail address: tajones@hilcorp.com PHONE: 505.324.5185

For State Use Only

APPROVED BY Accepted for Record TITLE AV DATE _____
 Conditions of Approval (if any):