

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

IL CONS. DIV DISTRICT
 NOV 06 2017

State of New Mexico
 Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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. 30-039-29897
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator HILCORP ENERGY COMPANY		6. State Oil & Gas Lease No. E-346-18
3. Address of Operator PO BOX 4700, FARMINGTON NM 87499		7. Lease Name or Unit Agreement Name San Juan 31-6 Unit
4. Well Location Unit Letter <u>K</u> : <u>2210</u> feet from the <u>South</u> line and <u>2125</u> feet from the <u>West</u> line Section <u>32</u> Township <u>31N</u> Range <u>06W</u> NMPM Rio Arriba County		8. Well Number <u>47F</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6304' GR		9. OGRID Number <u>372171</u>
10. Pool name or Wildcat Blanco Mesaverde / Basin Dakota		

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 checked="" 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: <input type="checkbox"/>	
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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.

- 10/26/17 MIRU. ND WH. NU BOP & PT, test good. Pull hanger & free tbg. Tag fill @ 7775'. SDON.
- 10/27/17 TOO H w/2-3/8" tbg. TIH w/3-3/4" bit to 6340'. Unload well. Pump 500 gals 15% HCL w/10 gals corrosion inhibitor. Flush w/140 gals fresh water. SDFW.
- 10/30/17 TIH, tag fill @ 7775'. CO to PBTD @ 7874'. Tie back & TOO H above MV perms. SDON.
- 10/31/17 TOO H w/3-3/4" bit. TIH w/production BHA. PT tbg to 500#, test good. Land 254 jts 2-3/8" 4.7# J-55 T&C Upset @ 7808', SN @ 7806'. ND BOP. NU WH. RD. Rig released.

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 Tammy Jones TITLE Operations/Regulatory Technician – Sr. DATE 11/1/2017

Type or print name Tammy Jones E-mail address: tajones@hilcorp.com PHONE: 505.324.5185

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APPROVED BY: Bob [Signature] TITLE Deputy Inspector DATE 11/20/17
 Conditions of Approval (if any): N