

Submit 3 Copies 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 Rs., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103

Revised July 18, 2013

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

WELL API NO. 30-039-26706
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-289-51
7. Lease Name or Unit Agreement Name SAN JUAN 29-6 UNIT
8. Well Number 10B
9. OGRID Number 372171
10. Pool name or Wildcat MV - BLANCO::MESAVERDE

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	A	Footage	1137' FNL & 811' FEL		
Section	02	Township	029N	Range	006W RIO ARRIBA COUNTY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6489' 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"/>			
CLOSED-LOOP SYSTEM <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well was re-delivered on 12/13/2017 and produced natural gas and entrained hydrocarbons.

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

TP: 147 CP: 152 Initial MCF: 167
 Meter No.: 83306-01 Gas Co.: WFC
 Proj Type.: REDELIVERY
 Spud Date: 4/9/2001 Rig Released Date: 12/12/2017

OIL CONS. DIV DIST. 3
 DEC 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 12/19/2017
 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): _____