

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. <b>30-045-30382</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>FEE</b>
7. Lease Name or Unit Agreement Name <b>CARLE</b>
8. Well Number <b>1B</b>
9. OGRID Number <b>372171</b>
10. Pool name or Wildcat <b>FRC - BASIN CB::FRUITLAND COAL</b>

**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  
**382 Road 3100 Aztec, NM 87410**

4. Well Location  
 Unit Letter **E** Footage **1955' FNL & 930' FWL**  
 Section **20** Township **030N** Range **011W** **SAN JUAN COUNTY**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**5670' GR**

**NMOCB**  
**JAN 03 2019**  
**DISTRICT III**

12. CHECK APPROPRIATE BOX(ES) 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 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 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 12/14/2018 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERY / WELL WAS SHUT IN DUE TO ECONOMICS.

TP: 4 CP: 37 Initial MCF: 32  
 Meter No.: 98-240-01 Gas Co.: ENT  
 Proj Type.: REDELIVERY  
 Spud Date: 12/4/2000 Rig Released Date:

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

SIGNATURE *Priscilla Shorty* TITLE Operations/Regulatory Tech - Sr. DATE 12/28/2018  
 Type or print name Priscilla Shorty E-mail address: pshorty@hilcorp.com PHONE: 505.324.5188

APPROVED BY: ACCEPTED FOR RECORD TITLE AY DATE \_\_\_\_\_  
 Conditions of Approval (if any):