Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	June 16, 2008 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II		30-045-35073
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		FEE
	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	LESTER
PROPOSALS.)	Cas Wall M Other	8. Well Number 1B
Type of Well: Oil Well     Name of Operator	Gas Well Other	9. OGRID Number 14538
, <u> </u>	ES OIL & GAS COMPANY LP	7. OGRAD Number 14336
3. Address of Operator		10. Pool name or Wildcat
P.O. BOX 4289, FARMINGT	ON NM 87499	BASIN DAKOTA / BLANCO MESAVERDE
4. Well Location		
Unit Letter D: 98' feet from the FNL line and 1290' feet from the FWL line		
Section 03 Towns	<u> </u>	M SAN JUAN County NM
The second secon	11. Elevation (Show whether DR, RKB, RT, GR, 5637' GR	, etc.)
	5037 GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data		
	ITENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL V	<del>-</del>
TEMPORARILY ABANDON		E DRILLING OPNS. □ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL   CASING/CEI	MENT JOB
OTHER:	☐ OTHER:	FIRST-DELIVERY 05/08/11
		s, 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.		
This well is a new drill and was firs	t-delivered on <u>05/08/11</u> and produced natural gas a	nd entrained hydrocarbons of 25.465 MCF.
THIS WELL WAS DELIVERED THROUGH GAS RECOVERY COMPLETION. STARTED SELLING ON THE MV & DK		
TOGETHER ON 05/08/11. FINISH	HED THE GAS RECOVERY COMPLETION 05/3	13/11.
TO. N/A CD. N/A	Initial MCIE. 25 465	RECEIVED  OIL CONS. DIV. DIST. 3  Address and belief
TP: N/A CP: N/A	Initial MCF: 25,465	RECEIVED 23 1 1 2 2011 2
Meter No.: 35898		E DECENTE E
		RECEIVED B
Gas Co.: WFS		© MAY 2011 2
		OIL CONS. DIV. DIST. 3 $\sqrt{S}$
I handry antify that the information	have interested to the last of	1.1
I hereby certify that the information	above is true and complete to the best of my know	vledge and belief.
0		15050
SIGNATURE Janden	TITLE Staff Regulatory	TechDATE05/16/11
Type or print name Tamra Sessio For State Use Only	ns E-mail address: tamra.d.sessions@Co	mocophilips.com PHONE:505-326-9834
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		