

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 87400
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

HOBBS OGD

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

JUN 23 2014

WELL API NO. 30-025-03858
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1553
7. Lease Name or Unit Agreement Name State E Tract
8. Well Number 22
9. OGRID Number 270801
10. Pool name or Wildcat ABO-SWD

SUNDRY RECORDS 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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD	
2. Name of Operator Rocky Smith SWD Systems, Inc.	
3. Address of Operator 1515 Wazee Street, Suite 350 Denver CO 80202	
4. Well Location Unit Letter G : 1650 feet from the N line and 1650 feet from the E line Section 2 Township 17S Range 36E NMPM LEA County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: Final P&A Inspection ☒

12-9-13

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 location is ready for final inspection and release from bonding obligations.

E-PERMITTING
P&A NR _____
INT to P&A _____
CSNG _____
TA _____
P&A R P.M.
CHG Loc _____

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 Scotty A. Smith TITLE President DATE 6/19/2014
Type or print name Scotty A. Smith E-mail address: scotty@3forksres.com PHONE: 303.318.0717
For State Use Only
APPROVED BY: Mark Whitaker TITLE Compliance Officer DATE 07/01/2014
Conditions of Approval (if any):

JUL 02 2014