

Submit 1 Copy To Appropriate District Office

State of New Mexico
Minerals and Natural Resources

Form C-103
Revised July 18, 2013

District I - (575) 393-6161
1625 N. French Dr., I
District II - (575) 740-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6177
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., S
87505

HOBBS OCD
JUL 23 2018
RECEIVED

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

WELL API NO. 30-025-28027
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LC 029512B
7. Lease Name or Unit Agreement Name Teas Yates Unit
8. Well Number 1-2
9. OGRID Number 196069
10. Pool name or Wildcat Teas Yates SR
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3614.2 GR

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 Injection

2. Name of Operator
Momentum Operating Co., Inc.

3. Address of Operator
P.O. Box 2439 Albany, Texas 76430

4. Well Location
Unit Letter E : 1980 feet from the N line and 10 feet from the W line
Section 18 Township 20S Range 34E NMPM LEA County

12. Check Appropriate Box 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: PUT BACK ON <input checked="" type="checkbox"/>	

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.

On March 25, 2018 we began injecting into the above well with 18 bbl/day

R-7084

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 Megaen Birdwell TITLE Land Manager DATE 7/18/2018

Type or print name Megaen Birdwell E-mail address: megaen@momentumoperating.com PHONE: 325-762-2366 x 108

For State Use Only

APPROVED BY: Loren Sharp TITLE Staff Mgr DATE 7-23-18
Conditions of Approval (if any):