

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III
1000 Rio Brazos Rd., Artesia, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 133573

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NUMBER 30-025-39908
1. Type of Well: O		5. Indicate Type of Lease S
2. Name of Operator SIANA OPERATING LLC		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 10303, Midland, TX 79702		7. Lease Name or Unit Agreement Name CURRY STATE
4. Well Location Unit Letter <u>E</u> : <u>1980</u> feet from the <u>N</u> line and <u>990</u> feet from the <u>W</u> line Section <u>22</u> Township <u>23S</u> Range <u>34E</u> NMPM Lea County		8. Well Number 005
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3452 GR.		9. OGRID Number 168687
Pit or Below-grade Tank Application ☐ or Closure ☐ Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat

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 OF PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
 COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
 CASING/CEMENT JOB ☐
 Other: **Drilling/Cement** ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
 6-16-11 Wait on casing crew 1 hr, rig up and run 175 JTS 17#- J55-LTC 5.5" CSG TOTAL PIPE 7855' - SET @ 7850'. CMT LEAD 350 SKS W/50/50 POZ 12.1 PPG-2.21 YIELD, TAIL 280 SKS H 15.6 PPG-1.19 YIELD. DROP PLUG DISPLACE W 180 BBLs FW, BUMP PLUG with 2000 PSI, FLOAT HELD at 4:30 pm for 30 minutes. NIPPLE DOWN SET SLIPS W/75k-CUT CSG & NIPPLE UP TUBING HEAD in 4 hours. Rig released at 12 midnight 6-16-2011. 5/24/2011 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
05/25/11	Surf	FreshWater	17.5	13.375	48	J-55	0	630	300	1.89	C		1000	0	Y
05/25/11	Surf	FreshWater	17.5	13.375	48	J-55	380	630	210	1.34	C		1000	0	Y
06/09/11	Int1	Brine	11	8.625	32	J-55	0	4800	264	1.64	C	1200	1000	0	Y
06/09/11	Int1	Brine	11	8.625	32	J-55	1200	4800	325	2.86	C & H		1000	0	Y
06/09/11	Int1	Brine	11	8.625	32	J-55	1500	4800	550	2.86	C & H		1000	0	Y
06/16/11	Prod	CutBrine	7.875	5.5	17	J-55	3555	7850	350	2.21	50/50 POZ		2000	0	Y
06/16/11	Prod	CutBrine	7.875	5.5	17	J-55	6500	7850	280	1.19	H		2000	0	Y

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed _____ TITLE Manager _____ DATE 6/23/2011
 Type or print name Paula McMillan _____ E-mail address pmcmillan@sianoil.com _____ Telephone No. 432-687-6600

For State Use Only:

APPROVED BY: Paul Kautz _____ TITLE Geologist _____ DATE 6/23/2011 3:51:40 PM