District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720
District III
1000 Rio Brazos Rd., Aztec, 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
August 1, 2011

Permit 147662

WELL API NUMBER	30-015-39880
5. Indicate Type of Lease	F
6. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: I	7. Lease Name or Unit Agreement Name: PARKWAY DELAWARE UNIT
	8. Well Number: 521
2. Name of Operator: SM ENERGY COMPANY	9. OGRID Number: 154903
3. Address of Operator: 3300 N. A Street Bldg. #7, Suite 200, Midland, TX 79705	10. Pool name or Wildcat

4. Well Location
Unit Letter F : 1420 feet from the N line and 1330 feet from the W line
Section 35 Township 19S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.): 3311 GR

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_____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
Other:		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.
4/15/12 SET 5 JTS OF 20" J-55 94# BTC CSG; 4/16-17/12 CEMENT 20" CSG**4/13/2012** 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
04/15/12	Surf	FreshWater	26	20	94	J-55	146	201	180	1.49	H		425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	146	201	510	1.34	C		425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	111	201	50	1.49	H	115	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	107	201	50	1.49	H	81	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	106	201	50	1.49	H	85	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	100	201	50	1.49	H	85	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	94	201	50	1.49	H	85	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	85	201	50	1.49	H	53	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	40	201	50	1.49	H	30	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	23	201	50	1.49	H	20	425	0	Y
04/15/12	Surf	FreshWater	26	20	94	J-55	0	201	88	1.49	H	0	425	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 PRODUCTION ANALYST DATE 4/23/2012

Type or print name DONNA HUDDLESTON E-mail address dhuddleston@stmaryland.com Telephone No. 432-688-1789

For State Use Only:

APPROVED BY: Randy Dade TITLE District Supervisor DATE 4/24/2012 7:30:50 AM