

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 87410
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

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

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	7. Lease Name or Unit Agreement Name ALPHA DOG STATE
2. Name of Operator Texas Standard Operating NM LLC	8. Well Number 003H
3. Address of Operator 3300 North A Street Midland, TX 79705	9. OGRID Number 329818
4. Well Location Unit Letter O : 1000 feet from the SOUTH line and 1657 feet from the EAST line Section 10 Township 17S Range 36E NMPM County Lea	10. Pool name or Wildcat WC-025 G-09 S1736100; UPPER PENN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3848'	

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: Cancel Permit <input checked="" type="checkbox"/>		OTHER: <input 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.

Spud Date: **N/A** Rig Release Date: **N/A**

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE **Timothy M. Roberson** TITLE **President** DATE **1/20/21**

Type or print name **Timothy M. Roberson** E-mail address: **tim@txsoil.com** PHONE: **713-655-1195**
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____

District I
1625 N. French Dr., Hobbs, NM 88240
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Oil Conservation Division
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Santa Fe, NM 87505

CONDITIONS

Action 15530

CONDITIONS OF APPROVAL

Operator:	OGRID:	Action Number:	Action Type:
TEXAS STANDARD OPERATING NM LL Building One, Suite 105 Midland, TX79705	329818	15530	C-103C
3300 North A Street			
OCD Reviewer	Condition		
pkautz	None		