

Santa Fe Main Office
Phone: (505) 476-3441
General Information
Phone: (505) 629-6116

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

Online Phone Directory Visit:
<https://www.emnrd.nm.gov/ocd/contact-us/>

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.)		WELL API NO. 30-015-39761
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Raybaw Operating, LLC		6. State Oil & Gas Lease No. 330726
3. Address of Operator 2626 Cole Avenue, Suite 300 Dallas, TX 75204		7. Lease Name or Unit Agreement Name Iron Duke
4. Well Location Unit Letter I : 2310 feet from the S line and 330 feet from the E line Section 09 Township 18S Range 26E NMPM County Eddy		8. Well Number 002H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3349' (GR)		9. OGRID Number 330220
10. Pool name or Wildcat Atoka, Glorieta-Yeso		

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 checked="" 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: <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.

Rigged up well servicing equipment. POOH with rods and pump. ND WH, NU BOP. POOH with tubing. BHA. RIH with tubing, tag @ 3518'. Drilled from 3518'-3518.5' in 30 mins. POOH. Continued drilling. TOH. Run production tubing. Removed BOP. TIH with pump and sucker rods. Spaced out pump. Good pumping action. Rigged down well servicing equipment and cleaned location. Returned well to production.

Spud Date:

11/8/2024

Rig Release Date:

11/11/2024

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

SIGNATURE Irma Rodriguez TITLE Regulatory Analyst DATE 12/10/2024
 Type or print name Irma Rodriguez E-mail address: Irma@oaknrg.com PHONE: 713-725-5660
For State Use Only

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

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CONDITIONS

Action 410288

CONDITIONS

Operator: RAYBAW Operating, LLC 2626 Cole Avenue Dallas, TX 75204	OGRID: 330220
	Action Number: 410288
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	12/17/2024