

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.) 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-025-34506
2. Name of Operator HILCORP ENERGY COMPANY		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 1111 TRAVIS ST, HOUSTON, TX 77002		6. State Oil & Gas Lease No.
4. Well Location Unit Letter L : 2310 feet from the SOUTH line and 330 feet from the WEST line Section 13 Township 20S Range 38E NMPM County LEA		7. Lease Name or Unit Agreement Name BUGLER [336726]
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3578' GR		8. Well Number 001
9. OGRID Number 372171		10. Pool name or Wildcat HOUSE; TUBB [78760]

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: RETURN TO PRODUCTION <input checked="" type="checkbox"/>	
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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.

HILCORP ENERGY COMPANY RETURNED THIS WELL TO PRODUCTION 2/13/2025. PREVIOUS OPERATOR HAD THE WELL SI FOR A WELL FAILURE, BUT HILCORP TURNED ON GAS PRODUCTION WHILE EVALUATING THE WELL FOR WORKOVER.

Spud Date: **10/5/1998** Rig Release Date: **10/19/1998**

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

SIGNATURE: *Angela Koliba*

TITLE: Sr. Regulatory/Operations Tech

DATE: 3/14/2025

Type or print name: **Angela Koliba**
For State Use Only

E-mail address: **angela.koliba@hilcorp.com**

PHONE: **713-591-1244**

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

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CONDITIONS

Action 442545

CONDITIONS

Operator: HILCORP ENERGY COMPANY 1111 Travis Street Houston, TX 77002	OGRID: 372171
	Action Number: 442545
	Action Type: [C-103] Sub. For Delivery (C-103V)

CONDITIONS

Created By	Condition	Condition Date
jason.heslop	This sundry is Accepted into the record and should not be construed as having any affect upon the status of the well including whether the well is in inactive status or temporary abandonment; nor does it grant an extension to an injection permit.	12/22/2025