

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.)		WELL API NO. 30-021-20628
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator WHITING OIL AND GAS CORPORATION		6. State Oil & Gas Lease No.
3. Address of Operator 400 W ILLINOIS STE 1300 MIDLAND, TX 79701		7. Lease Name or Unit Agreement Name GALVESTON 1928-01
4. Well Location Unit Letter J 1659 feet from the SOUTH line and 1750 feet from the EAST line Section 1 Township 19N Range 28E NMPM County HARDING		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5412' GR		9. OGRID Number 25078
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS 640		

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

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> 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: FRIST PRODUCTION WELL TEST <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.

06/22/2014 SPUD WELL  
 06/23/2014 DRLD 12 1/4 HOLE, SET 9 5/8 J-55 36# SURF CSG @ 723' W/450 SXS CL C CMT, 14.80 PPG, 1.35 YEILD, CIRC TO SURF PRESS UP TO 600#  
 06/26/2014 DRLD 8 1/4 HOLE, SET 5 1/2 J-55 15.5# PROD CSG @ 2914' W/ 625 SXS CMT (350 SXS 2.62 YIELD/11.80 PPG + 275 SXS 1.86 YIELD/13.20), DID NOT CIRC TO SURF,PRESS UP TO 600 #, TD 2940 TOG @ 850' BY CBL,  
 06/28/2014 RELEASED RIG

02/16/2015 DATE OF FIRST PRODUCTION - 2 7/8" 5.9 # J-55 IPC TBG/PKR SET 2719', NO TAIL PIPE  
 SITP 500 PSI, BHP 711 PSI  
 02/27/2015 24 HR WELL TST: 2150 MCFPD @ TBG PRESS 140 PSI 1" FULL OPEN, NO WTR

Spud Date:

Rig Release Date:

RECEIVED OGD  
 015 MAR 12 P 3:15

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

SIGNATURE Kay Maddox TITLE: REGULATORY ANALYST DATE: 03/11/2015

Type or print name Kay Maddox E-mail address: [kay.Maddox@Whiting.com](mailto:kay.Maddox@Whiting.com) PHONE: 432-638-8475

For State Use Only

APPROVED BY: [Signature] TITLE DIST IV DATE 12/29/15  
 Conditions of Approval (if any):