

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

WELL API NO. 30-021-20647
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LEWIS 1928
8. Well Number 041
9. OGRID Number 25078
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS 640
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5538' GR

**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  Gas Well  Other

2. Name of Operator  
WHITING OIL AND GAS CORPORATION

3. Address of Operator  
400 W ILLINOIS STE 1300 MIDLAND, TX 79701

4. Well Location  
 Unit Letter F 1660 feet from the NORTH line and 1660 feet from the WEST line  
 Section 4 Township 19N Range 28E NMPM County HARDING

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" 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.

08/10/2014 SPUD WELL- DRLD 12 1/4" HOLE  
 08/11/2014 RAN 9 5/8" J-55 36# CSG SET @ 724' W/450 SXS CL C CMT (14.8 PPG 1.34 YIELD) CIRC CMT, PRESS TST TO 600# FOR 30 MIN  
 08/17/2014 RAN 5 1/2" J-55 15.5# CSG SET @ 2832 W/350 SXS CL C 11.8 PPG 7.61 YIELD + 275 SXS CL C 13.2 PPG 1.86 YIELD - TOTAL OF 625 SXS CMT - PRESSURE TST TO 600# FOR 30MIN - DID NOT CIRC CMT  
 08/18/2014 RELEASE RIG

Spud Date:  Rig Release Date:

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: 08/26/2014

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 12/28/15  
 Conditions of Approval (if any):