

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		WELL API NO. 30-021-20634
2. Name of Operator WHITING OIL AND GAS CORPORATION		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 400 W ILLINOIS STE 1300 MIDLAND, TX 79701		6. State Oil & Gas Lease No.
4. Well Location Unit Letter K 1659 feet from the SOUTH line and 1659 feet from the WEST line Section 33 Township 20N Range 28E NMPM County HARDING		7. Lease Name or Unit Agreement Name LEWIS 2028-33
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5510' GR		8. Well Number 1
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

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"/> <input checked="" type="checkbox"/> OTHER: FIRST PRODUCTION WELL TEST
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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.

07/24/2014 SPUDED WELL
 07/25/2014 DRLD 12 1/4" HOLE, RAN J-55, 9 5/8" 36# CSG SET @ 723' W/450 SXS CMT W/ 14.8PPG & 1.35 YIELD, CIRC CMT TO SURF
 07/31/2014 DRLD 8 3/4" HOLE, RAN J-55, 7" 20# CSG SET @ 2200' W/200 SXS CMT 2.09 YIELD 12.50 PPG + 100 SXS CMT 1.34 YIELD 14.80 PPG TOTAL OF 300 SXS CMT DID NOT CIRCULATE TO SURFACE
 08/02/2014 DRLD 6 1/4" HOLE, RAN J-55 5 1/2" CSG TO 2783 W/200 SXS CMT, CIRC, PRESS UP TO 660#, OK TD 2890
 08/03/2014 RELEASED DRILLING RIG
 02/16/2015 DATE OF FIRST PRODUCTION - 2 3/8" 4.6# J-55 IPC TBG/PKR SET 2650', NO TAIL PIPE, SITP 550 PSI, BHP 740 PSI
 02/18/2015 24 HR WELL TST: 210 MCFPD @ TBG PRESS 100 PSI 1" FULL OPEN, 20 BWPD

Spud Date:

Rig Release Date:

2015 MAR 12 P 2:18
 RECEIVED OCD

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 PHONE: 432-638-8475

For State Use Only
 APPROVED BY: [Signature] TITLE DIST IV DATE 12/28/14
 Conditions of Approval (if any)