

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. 30-021-20648
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 313463
7. Lease Name or Unit Agreement THORNTON 2027 33
8. Well Number 01
9. OGRID Number 25078
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE 640
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5694' 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 G 1674 feet from the NORTH line and 1754 feet from the EAST line
Section 33 Township 20N Range 27E NMPM County HARDING

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 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 checked="" 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"/>			

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.

01/06/2016 - SET CIBP @ 2650'
01/13/2016 - TAG CIBP @ 2650, TEST 5 1/2" CSG TO 500 PSI, HELD, SPOT 25 SXS CMT 2650-2403', SPOTTD 25 SXS CMT 827-580'
01/14/2016 - SHOT 4 PERF HOLES @ 500', PRESSURE TST CSG TO 1500#, COULD NOT PMP INTO PERFS, NMOCD APPROVED PROCEDURE TO PMP CMT TO SURF, PMP 50 SXS CMT 550' TO SURF, TOP OFF W/ 5 SXS CMT, RD, CLEANED SURF LOC, WELDED SURF PLATE & P&A MARKER

RE-SEEDING LOCATION WILL BE DONE DURING 2016 GROWING SEASON

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: 01/15/2016

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 1/26/16
Conditions of Approval (if any):