

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

OIL CONSERVATION DIVISION
1220 South St Francis Dr
Santa Fe NM 87505

Form C 103
Revised July 18 2013

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 30-025 29962
1 Type of Well Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		5 Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2 Name of Operator J Cooper Enterprises		6 State Oil & Gas Lease No NA
3 Address of Operator Box 55 Monument, NM 88265		7 Lease Name or Unit Agreement Name Anderson SWD
4 Well Location Unit Letter O 330 feet from the S line and 1980 feet from the E line Section 8 Township 20 Range 37 NMPM Lea County		8 Well Number 1
11 Elevation (Show whether DR, RKB, RT GR, etc.)		9 OGRID Number 244835
		10 Pool name or Wildcat Monument SA

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

NOTICE OF INTENTION TO		E-PERMITTING <SWD INJECTION>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	RE/ CONVERSION <input type="checkbox"/>	RBDMS <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	CO RETURN TO <input type="checkbox"/>	TA <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CA CSNG <input checked="" type="checkbox"/>	ENVIRO <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>		INT TO P&A <input checked="" type="checkbox"/>	CHG LOC <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>		P&A NR <input type="checkbox"/>	P&A R <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.

Proposed P & A

See Attached

The Oil Conservation Division
MUST BE NOTIFIED 24 Hours
Prior to the beginning of operations

HOBBS OCD

AUG 10 2015

RECEIVED

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 Eddie W Seay TITLE Dist Supervisor Agent DATE 8/10/15

Type or print name Eddie W Seay E-mail address seay04@leaco.net PHONE 575 392 2236

For State Use Only

APPROVED BY Malcolm Brown TITLE Dist Supervisor DATE 8/11/2015

Conditions of Approval (if any)

AUG 10 2015

MPB

