

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 type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-021-20588																												
2. Name of Operator WHITING OIL AND GAS CORPORATION		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>																												
3. Address of Operator 400 W ILLINOIS STE 1300 MIDLAND, TEXAS 79701		6. State Oil & Gas Lease No.																												
4. Well Location Unit Letter K: 1650 feet from the SOUTH line and 1930 feet from the WEST line Section 24 Township 19N Range 28E NMPM County HARDING		7. Lease Name or Unit Agreement Name HAZEN 1928																												
11. Elevation (Show whether DR, RKB, RT, GR, etc.) Gr 5344'		8. Well Number 24-1																												
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table border="0"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>P AND A <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td>DOWNHOLE COMMINGLE <input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>CLOSED-LOOP SYSTEM <input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>OTHER: <input type="checkbox"/></td> <td></td> <td>OTHER: <input type="checkbox"/></td> <td></td> </tr> </table>		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 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"/>		OTHER: <input type="checkbox"/>		9. OGRID Number 25078
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OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>																												
10. Pool name or Wildcat BRAVO DOME CARBON DIOXIDE GAS 640																														

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.

12/2/2013 - RAN 9 578" J-55 24 # SURFACE CASING SET @ 717' W/340 SXS CMT CIRC 20 SXS CMT TO SURFACE

RECEIVED
2013 DEC 13 1:00

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 Supervisor DATE 12/05/2013

Type or print name KAY MADDOX E-mail address: kay.maddox@whiting.com PHONE: 432.686.6709
For State Use Only

APPROVED BY: Ed Marta TITLE **DISTRICT SUPERVISOR** DATE 12/16/2013
 Conditions of Approval (if any):