

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. 30-015-44677
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name
8. Well Number: WDW-4
9. OGRID Number: 15694
10. Pool name or Wildcat:
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3565

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: INJ-DIS

2. Name of Operator
HOLLYFRONTIER NAVAJO REFINING LLC

3. Address of Operator
501 EAST MAIN STREET, ARTESIA, NEW MEXICO 88210

4. Well Location
 Unit Letter: N 1217 feet from the SOUTH line and 2443 feet from the WEST line
 Section: 23 Township: 17S Range: 27E NMPM County: EDDY

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 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: MIT TEST <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.
 Test can be performed 12/3/2018 at 10 am.
 (1) Will rig up and perform a MIT on WDW-4 annulus at a minimum of 500 psig for 30 minutes.
 (2) Will notify OCD in order to witness test.

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 Lewis R. Dade TITLE Env. Specialist DATE: 11/29/2018

Type or print name Lewis R. Dade E-mail address: Lewis.Dade@hollyfrontier.com PHONE: 575-703-4735

For State Use Only

APPROVED BY: [Signature] TITLE Environmental Engineer DATE 11/29/2018
 Conditions of Approval (if any):