

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.)		WELL API NO.
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator		6. State Oil & Gas Lease No.
3. Address of Operator		7. Lease Name or Unit Agreement Name
4. Well Location Unit Letter _____: _____ feet from the _____ line and _____ feet from the _____ line Section 32 Township Range NMPM County		8. Well Number
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number
		10. Pool name or Wildcat

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>	

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.

1/20/2020: Left Message for NMOCD District 2 of intent to spud @ 7:30a on 1/21/2020. 1/21/2020: Spud well at 7:30a  
\*\* 1/21-1/22/2020: Drill 14-3/4" surface hole to 585'. Lft msg for NMOCD of intent to run csg & perform cmt job. While running csg, hole packed off. Pull pipe to 537'. Stuck. Attempt to work stuck pipe free with no success. Cmt w/770sxs CI C. No returns to surf. WOC. Run TS. Lft msg for NMOCD District 2 reporting no cmt returns to surf and intent to run TS followed by a 1" top job.  
1/23/2020: Spoke w/NMOCD District 2 Mike Bratcher about 1" top job at 7:30a. 1" top off performed w/211sx CI C cmt. WOC. Run CBL. Lft msg notification for NMOCD of CBL.  
1/24-1/25/2020: WOC. Spoke w/NMOCD District 2 Ray Podany about CBL. Stated CBL looked good. Notified about BOP testing. Test BOP.  
\*\* 1/26-02/05/2020: Test csg to 1500psi for 30 minutes. Good test. Drill 10-5/8" intermediate hole to 6095'. Lost returns. Pump LCM. Drill fr/6095-6117'. Drill fr/6117-6265' w/water flow. Unable to keep up with amount of flowback. Brine MW fr/9.4-10ppg mud. Drill fr/6256-6813'. Observed water flow at surface. Strip out to 5948'. Prepared to kill well with 16ppg mud. Unable to kill well. Strip in hole fr/5949' to 6800'. Hang sheave. Drop swab cup & pump down in attempt to isolate BHA w/no success. RIH w/perf gun. Shoot perfs fr/6195-6204'. Pump 365sx CI C plug to kill well. WOC. Perform temp & sonic log fr/6181'-surf. Cmt plug unsuccessful. Attempt to set BP unsuccessfully. Set 2nd plug @ 5837'. Would not test. Sever pipe @ 4210'. Pump 2000sx CI C cmt plug to kill well. WOC. Perform temp & sonic log fr/5630' to surf. Run CBL. Well static.  
02/05/2020: Submit PA plan to NMOCD District 2.  
02/06/2020: PA approval received. Proceed w/PA operations.

**Please submit logs electronically through e docs.**

Spud Date:

Rig Release Date:

**\*\*Spud Hole and Intermediate is missing casing sizes ran casing depth?**

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Stephanie Rabadue TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_

**For State Use Only**

APPROVED BY: Gilbert Cordero TITLE Staff MGR DATE \_\_\_\_\_

Conditions of Approval (if any):