Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
1 Office	Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CO	DNSERVATION DIVISION	30-015-24784
<u>District III</u> – (505) 334-6178	20 South St. Francis Dr.	5. Indicate Type of Lease STATE □ FEE X
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		SWD-1228
SUNDRY NOTICES AND REP (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PERM	R TO DEEPEN OR PLUG BACK TO A	Lease Name or Unit Agreement Name Delaware River
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X O		8. Well Number
2. Name of Operator	1	9. OGRID Number
Mesquite SWD, Inc.		161938
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 1479, Carlsbad, NM 88221		SWD; Delaware
4. Well Location Unit Letter E 1980' feet	from the FNL line and 990'	Feet from the W line
	wnship 26S Range 28E	NMPM County Eddy
	n (Show whether DR, RKB, RT, GR, et	, , , , , , , , , , , , , , , , , , , ,
40 (0)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION T	O: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK □ PLUG AND A		5 m at
TEMPORARILY ABANDON ☐ CHANGE PLA	1	
PULL OR ALTER CASING MULTIPLE CO		
DOWNHOLE COMMINGLE		
OTHER:	OTHER Pressur	e - volume X
13. Describe proposed or completed operations	. (Clearly state all pertinent details, and	d give pertinent dates, including estimated date
of starting any proposed work). SEE RULE	E 19.15.7.14 NMAC. For Multiple Co.	npletions: Attach wellbore diagram of
proposed completion or recompletion.		
1		
As requested: Average injection pressure 475 PSI, V	olume average 850 BSWPD	
;		
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,		RECEIVED
		FEB 4 2013
		NMOCD ARTESIA
Spud Date:		
-	Rig Release Date:	
•	Rig Release Date:	
	;	e and belief.
I hereby certify that the information above is true and	;	e and belief.
I hereby certify that the information above is true and	d complete to the best of my knowledge	
I hereby certify that the information above is true and SIGNATURE Kay Havenor	;	DATE 1/31/2013
I hereby certify that the information above is true and SIGNATURE Kay Havenor Kay Havenor	TITLE - Agent E-mail address: KHavenor@geore	
I hereby certify that the information above is true and SIGNATURE Kay Havenor	d complete to the best of my knowledge	DATE <u>1/31/2013</u>
I hereby certify that the information above is true and SIGNATURE Kay Havenor Kay Havenor	TITLE - Agent E-mail address: KHavenor@geore	DATE <u>1/31/2013</u>
I hereby certify that the information above is true and SIGNATURE Type or print name Kay Havenor For State Use Only	TITLE - Agent E-mail address: KHavenor@geore	DATE <u>1/31/2013</u>