Submit One Copy To Appropriate District Office	tate of New Mexico	Form C-103
<u>District I</u> Energy, M	inerals and Natural Resources	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-015-22878
811 S. First St., Artesia, NM 88210 OIL COI	ISERVATION DIVISION	5. Indicate Type of Lease
1000 Pio Brazos Rd. Aztec NM 97/10	South St. Francis Dr.	STATE S FEE
District IV	anta Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		LG-6340
SUNDRY NOTICES AND REPO		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DIFFERENT RESERVOIR. USE "APPLICATION FOR PERM		AID 24 State Com
PROPOSALS.)	(FORMIC-101) FOR SUCH	o willy 1 //1 cwb
1. Type of Well: Oil Well Gas Well 🖂 C	ther SWD	8. Well Number #1 SWD
2. Name of Operator		9. OGRID Number
Lime Rock Resources A, L.P.  3. Address of Operator		255333 10. Pool name or Wildcat
1111 Bagby St Ste 4600 Houst	on, TX 77002	Cisco
4. Well Location		
Unit Letter N : 660 feet from the South line and 1980 feet from the West line		
Section 24 Township 17S Range 28E NMPM County Eddy County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3705' GL  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABTEMPORARILY ABANDON ☐ CHANGE PLA		
PULL OR ALTER CASING MULTIPLE CO		_
TOLE ON METER ONOMO	o/toilto/oEMEITI	
OTHER:	Location is re	ady for OCD inspection after P&A
		•
02/14/2013 MIRU N/U BOP, TIH w/ 1" equalizing spear PSBU 500# tag @8429', 2.25"FEW Blaning plug TOH,		
TIH w/ 2-1/2" JDC, TOH.		
<b>02/15/2013</b> Released 5-1/2" x 2-7/8"ASI TOH.		
<b>02/16/2013</b> TIH w/ 5-1/2" x 2-7/8" ASI test 5000# w/ 15sec hold, replaced 1 bad jt, Packer Set @ 8439' 265 jts.		
S/I BOP. PBU to 500#, tested good. RD BOP set pkr @ 8439' w/ 265 jts w/ 20 points. Comp. tested csg 540#		
30min, tested good. RD & clean location.		
	RECE	EIVED
111.50.	ing of well bore only.	· ·
of C-103 (Subseque	ent Report of Well Plugging) FED 2	<b>6</b> 2013
which may be foun Forms, www.cmnrd	d at OCD Web Page under	ARTESIA
	NMOCD	ANILOM
0 / H		
SIGNATURE TITLE Assistant Production Supervisor DATE 02/26/2013		
TYPE OR PRINT NAME Jerry Smith	E MAIL: iomith@limel	DHONE: 575 740 0724
For State Use Only	E-MAIL: <u>jsmith@limerockre</u>	esources.com PHONE: <u>575-748-9724</u>
0 /	_	
APPROVED BY: KUMPED WEES	TITLE COMPLIANCE	DOTUR DATE 2/27/13
Conditions of Approval (if any):		

