Submit I Copy To Appropriate District Office		te of New Me			Form C-10.	
District I - (575) 393-6161	Energy, Min	erals and Natu	ral Resources	WELL API NO.	Revised August 1, 201	<u>-</u>
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONS	SERVATION	DIVICION	300252007800		1
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1	South St. Fran		5. Indicate Type of L		
1000 Rio Brazos Rd., Aztec, NM 87410		ita Fe, NM 87		STATE STATE 6. State Oil & Gas Le	FEE	
<u>District IV</u> - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM			202	6. State Off & Gas Le	ase ino.	
87505	CES AND REPOR	TC ON WELLS		7. Lease Name or Un	it A anomant Nama	$\dashv$
(DO NOT USE THIS FORM FOR PROPOS	SALS TO DRILL OF TO	O DEEPEN OR PLU		PURE STA	-	
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	ATION FOR PERMIT	" (FORM C-101) FC	R SUCH			
	Gas Well 🔲 Oth	er		8. Well Number 2		
2. Name of Operator TANDEM ENERGY				9. OGRID Number	236183	
3. Address of Operator				10. Pool name or Wil	dcat	-
2700 POST OAK BLVD., SUITE 1	000			PEARL QUEEN		
4. Well Location	1980 feet from	. COUT	LI 66	30	EACT "	
Unit Letter:::::::_						
Section 36			<sub>nge</sub> 34E RKB, RT, GR, etc.,		ounty	
	3,702' GR					
12. Check A	ppropriate Box	to Indicate N	ature of Notice,	Report or Other Da	t <b>a</b>	
NOTICE OF IN	TENTION TO:		SUB	SEQUENT REPO	RT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABAN		REMEDIAL WOR		TERING CASING 🔲	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI		ND A	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COM	PL 🗍	CASING/CEMEN	1 108		
50,111,10,12,001,111,111,10,12						
OTHER:		<u> </u>	OTHER:			<del>-</del>
13. Describe proposed or complete of starting any proposed wo						ite
proposed completion or reco			or manipie co.	inproteeris. Titalon meno	ore drag.am or	
Pull out of hole with rods, pu		4604! 4604! v	ith 20 cooks of co		inht Dranaura	40.04
Run in hole with packer and s squeeze for seal. Re-squeeze					-	
4882'-4890' with 30 sacks of co	_				•	
		_			·	ieeded to
get a seal. Perforate the interven	31 4920 -4949 WILL	4 shots per 100	. Acidize and frac	the new interval. Put of	i production.	
				DEC		
	I			Incl	EIVED	
	l			MAR	<b>1 1</b> 2013	1
S-ud D-u-		Dis Dalama Da				
Spud Date:		Rig Release Da	te:	NMOC	D ARTESIA	
I hereby certify that the information a	bove is true and co	mplete to the be	st of my knowledge	e and belief.		<del></del>
$\mathcal{A}$		)				
SIGNATURE TO NEW	Drown	TITLE Regula	atory Administrate	DATE_	March 6, 2013	
Type or print same Tamarica Emp	nons	ــــــــــــــــــــــــــــــــــــــ	. Temmone@pl	latenergy.com PHONI		
Type or print name Tamarica Emn For State Use Only	10118	E-mail address	remmonscop	PHONI	3: 110 001-1020	
A 1/2	0	\ \ \	B Supervisor		aliel lance	
APPROVED BY: ( / / K) Conditions of Approval (if any):	<u> </u>	TITLE WIST	a sopewison	DATE	3/14/2013	
conditions of tiphtotal (ii and).						