

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

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised August 1, 2011

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. 30-015-23099
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Guardian Operating Corp.		6. State Oil & Gas Lease No.
3. Address of Operator 6824 Island Cir. , Midland, TX 79707		7. Lease Name or Unit Agreement Name Guitar 10
4. Well Location Unit Letter <u>B</u> : 660 feet from the <u>N</u> line and <u>2310</u> feet from the <u>E</u> line Section <u>10</u> Township <u>24S</u> Range <u>28E</u> NMPM EDDY County		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2991' GR		9. OGRID Number 287300
		10. Pool name or Wildcat Culebra Bluff; Wolfcamp, South (Gas)

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 checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

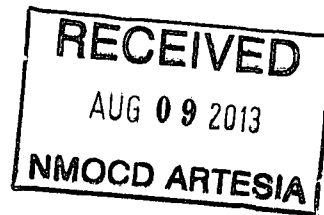
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

2/21/2013: Dug out old cellar deeper. Welders cut bolts on wellhead. Attempt to remove wellhead.  
3/04-05/2013: Cut off old wellhead. Install new 13 3/8" csg head and 9 5/8" csg hanger. Set new cellar.  
4/17-5/08/2013: RU AAA workover unit and Cavaloz reverse unit. Drilled out plugs and CIBPs to TD of 11,106'. Secure wellhead and RD.  
6/17-20/2013: RU workover unit. RIH with 10, 980' - 5 1/2", 20#, N-80 & L-80 csg w/ 2 shoe jnts below flt collar. Cmt w/ 100 sx Class H. 6/28/13 Ran CBL. TOC @ 9420'.  
7/23/2013: RU Jarrel and perf Wolfcamp with 3 3/4" csg guns, 10,614-721'. Hole full FW.  
7/24/2013: SITP 2300#.

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 [Signature] TITLE President DATE 8/5/2013

Type or print name Randall Cate E-mail address: Guardian\_op@yahoo.com PHONE: 432-553-1849

For State Use Only

APPROVED BY: [Signature] TITLE Dist. P. Supervisor DATE 8/19/13

Conditions of Approval (if any):