

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-015-31916
2. Name of Operator LRE Operating, LLC	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 1111 Bagby Street, Suite 4600, Houston, TX 77002	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>E</u> : <u>2310</u> feet from the <u>North</u> line and <u>430</u> feet from the <u>West</u> line Section <u>28</u> Township <u>17S</u> Range <u>28E</u> NMPM Eddy County	7. Lease Name or Unit Agreement Name Welch RL State
	8. Well Number <u>1</u>
	9. OGRID Number <u>281994</u>
	10. Pool name or Wildcat Artesia, Glorieta-Yeso (96830) Red Lake, San Andres (97253)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3633' GL	

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

NOTICE OF INTENTION TO:

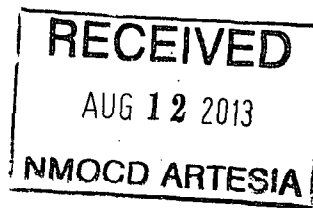
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: Returned to Production ☒

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.

Replaced down hole pump.
Returned to Production.



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

TITLE Production Supervisor

DATE 08-06-2013

Type or print name Michael Barrett

E-mail address: mbarrett@limerockresources.com

PHONE: 575-623-8424

For State Use Only

APPROVED BY:

TITLE Dist. Rep. Supervisor

DATE 8/19/13

Conditions of Approval (if any):