

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
NM OIL CONSERVATION
 Department of Natural Resources
 ARTESIA DISTRICT
OIL CONSERVATION DIVISION
 DEC 01 2014
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
RECEIVED

Form C-103
 Revised July 18, 2013

| | |
|---|--------------|
| WELL API NO. | 30-015-42307 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> | |
| 6. State Oil & Gas Lease No. VB-1659 | |
| 7. Lease Name or Unit Agreement Name Forehand 22 State | |
| 8. Well Number #1 | |
| 9. OGRID Number 249099 | |
| 10. Pool name or Wildcat Cass Draw; Delaware 10410 | |

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 Gas Well Other

2. Name of Operator
Caza Operating, LLC

3. Address of Operator
200 N. Loraine, Suite 1550, Midland, Texas 79701

4. Well Location
 Unit Letter 0 : 660 feet from the South line and 1980 feet from the East line
 Section 22 Township 23 S Range 27 E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3158 GR

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 type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| CLOSED-LOOP SYSTEM <input type="checkbox"/> | | | |
| OTHER: <input type="checkbox"/> | | OTHER: <u>frac</u> <input checked="" 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.

11-8-2014_ MIRU Frac equipment. SICP 8 psi. Load hole w/ 56 bbls treated water. Treated well down 2-7/8" tubing with 20 bbls Linear Gel Pad. Propped w/ 15,380 lbs 16/30 Momentive Ultra Black Sd carried by 20 lb BXL fluid. AIR 7.8 BPM @ 938 psi. Max pressure 1120 psi @ 8.6 BPM. ISIP 766 psi. R/D Frac Equipment. Total load 164 bbls. Casing pressure monitored as dead string.

Spud Date: April 30th, 2014 Rig Release Date: June 9th, 2014

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Richard L. Wright TITLE Operations Manager DATE 11/25/2014

Type or print name Richard L. Wright E-mail address: rwright@cazapetro.com PHONE: 432 682 7424

For State Use Only

APPROVED BY: [Signature] TITLE Dist II Supervisor DATE 12/19/14

Conditions of Approval (if any):