

Submit 1 Copy To Appropriate District
Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 393-6161
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87401
District IV - (505) 476-3400
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

RECEIVED 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. 30-005-64212
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Jalapeno Corporation		6. State Oil & Gas Lease No. V0-9290
3. Address of Operator P.O. Box 1608 Albuquerque, NM 87103		7. Lease Name or Unit Agreement Name Kobe 22
4. Well Location Unit Letter E : 2190 feet from the North line and 280 feet from the West line Section 22 Township 9-S Range 27-E NMPM County Chaves		8. Well Number #1Y
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 26307
		10. Pool name or Wildcat Wolflake; San Andres, S.

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: Perforation <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.

2/16/15 Perforated well with 27 shots as follows:
Perforated 2070-2074 (9 shots @ 2sht/ft).
Perforated 2082-2086 (9 shots @ 2sht/ft).
Perforated 2090-2094 (9 shots @ 2sht/ft).

The above perforation were acidized by Pacesetter with 2,000 gallons of 20% acid.

Spud Date:

10/7/14

Rig Release Date:

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

SIGNATURE

H. Emmons

TITLE Vice President

DATE 2/27/2015

Type or print name H. Emmons, Yates III

E-mail address: eyates@jalapenocorp.com PHONE: 505-242-2050

For State Use Only

APPROVED BY:

D. Dade

TITLE

D. Dade

DATE

3/13/15

Conditions of Approval (if any):