

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

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.)		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>Salt Dmn Storage</u>		6. State Oil & Gas Lease No. <u>APR</u> <u>02-635 30-15-06194</u>
2. Name of Operator <u>Loco Hills RSP LTD</u>		7. Lease Name or Unit Agreement Name <u>Leonard</u>
3. Address of Operator <u>1231 Old Annette Rd Alamo, Texas 76008</u>		8. Well Number <u>Leonard State #3</u>
4. Well Location Unit Letter <u>L</u> : <u>1975</u> feet from the <u>South</u> line and <u>560</u> feet from the <u>West</u> line Section <u>17.5</u> Township <u>29E</u> Range <u>NMPM</u> County <u>Eddy</u>		9. OGRID Number
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		10. Pool name or Wildcat

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: ☒

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.

RAN Wire line - log Attached
Ran 1/4" Coil tubing to with tri pipe to 615'.
Nipped up, rigged down

NM OIL CONSERVATION
ARTESIA DISTRICT

JUL 07 2015

RECEIVED

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

John B. Smith

TITLE

Agent

DATE

July 3, 2015

Type or print name

E-mail address:

PHONE:

For State Use Only

APPROVED BY:

JD Dole

TITLE

DIST. FR. SUPERVISOR

DATE

July 7, 2015

Conditions of Approval (if any):