

Submit 1 Copy To Appropriate District  
Office  
District I - (573) 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

WELL API NO. 30-005-62806
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-3354
7. Lease Name or Unit Agreement Name QUAIL STATE
8. Well Number 1
9. OGRID Number 009338
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3869.6' GR

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator GREAT WESTERN DRILLING COMPANY	
3. Address of Operator P.O. BOX 1659 MIDLAND, TX 79702	
4. Well Location Unit Letter A : 660 feet from the NORTH line and 660 feet from the EAST line Section 36 Township 6S Range 24E NMPM County CHAVES	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3869.6' 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 checked="" 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"/>			
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.

7/28/2015 - RU Key Swabbing Unit. RIH w/ empty no-go to bottom of tubing @3,450'. POOH. Started swabbing w/ fluid level at surface. Made 4 swab runs. Recovered 15 BW. Final fluid level 3,000' from surface. Well flowing to transport for 1 1/2 hrs. FTP 30 psi CP 230 psi. SI Tubing & casing pressure equalized to 260 psi. Left shut in for night.

7/29/2015 - SIPT 300 psi. Opened well to sales line. RD Key Swabbing Unit. Final Report.

NM OIL CONSERVATION  
ARTESIA DISTRICT

SEP 30 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 Dennis L. Hendrix TITLE VP OPERATIONS DATE 9/29/15

Type or print name DENNIS L. HENDRIX E-mail address: dhendrix@gwdc.com PHONE: (432)682-5241  
For State Use Only

APPROVED BY: [Signature] TITLE DIST # Supervisor DATE 9/30/15

Conditions of Approval (if any):