

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
 Minerals and Natural Resources
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 October 13, 2009

RECEIVED
MAR 02 2016
ARTESIA DISTRICT

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. 30-015-04004
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator J. Cleo Thompson		6. State Oil & Gas Lease No. LC 063926
3. Address of Operator 117 W Yukon Rd. Odessa, TX 79764		7. Lease Name or Unit Agreement Name WSLU Tract 5
4. Well Location Unit Letter F : 1980 feet from the N line and 1980 feet from the W line Section 35 Township 16S Range 30E NMPM County Eddy		8. Well Number 8
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3787 KB		9. OGRID Number
10. Pool name or Wildcat Grayburg-San Andreas		10. Pool name or Wildcat Grayburg-San Andreas

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <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.

02/16/16 MIRU Plugging equipment. Dug out cellar. 02/17/16 ND wellhead, NU BOP. Pulled 2675' 86 jts of 2 3/8 tbg. RIH w/ tbg to 2900'. Pumped 50 bbls of brine at 2900'. Spot 35 sx class C cmt @ 2900'. WOC. 02/18/16 Tagged plug @ 2550'. Pressure tested csg, held. Perf'd csg @ 1460'. RIH w/ 7" packer & sqz'd 45 sxs class C cmt w/ 2% CACL & displaced to 1350'. WOC. Tagged plug @ 1342'. Perf'd csg @ 620'. Sqz 45 sx class C cmt 1.5 BPM 0 psi. WOC. Pressure tested sqz, held 500 psi. Tagged TOC @ 500'. Perf'd csg @ 100'. Circulated hole w/ 15 bbls, fluid falling. Spot 45 sx class C cmt @ 150' & circulated to surface. 02/22/16 Topped off cmt @ 6' to surface. Rigged down and moved off. 02/24/16 Moved in welder and backhoe. Dug out cellar. Cut off wellhead. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Removed deadmen and moved off.

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 Shelly Bilberry TITLE Regulatory Specialist DATE 2/29/16
 Type or print name Shelly Bilberry E-mail address: sbilberry@jeko.com PHONE: 432 550 8887
For State Use Only

APPROVED BY: RD Dade TITLE Dis. R. Supervisor DATE 3/14/16
 Conditions of Approval (if any):

** Submit Subsequent C-103*