Submit 1 Copy To Appropriate Distance EXVATION State of New Mexico Office	Form C-103
District I – (575) 393-6161 ARTESIA DISTRICTEnergy, Minerals and Natural Resources	Revised July 18, 2013
District II – (575) 393-6161 ARTESIA GISTRICT LITERRY, WINICIAIS and Natural Resources  1625 N. French Dr., Hobbs, NM_88240 6 2017  811 S. First St., Artesia, NM 88210  District III – (505) 334-6178  1220 South St. Franciscopy	WELL API NO.
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION O	30-015-24151-00-00
District III – (505) 334-6178 1220 South St. Francisco	Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NNREUELVEL	STATE M FEE
	6. State Oil & Gas Lease No.
87505 <b>RECEN</b> 2.	-
1220 S. St. Francis Dr., Santa Fe, NM 87505  SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)	Yarbro A Com
1. Type of Well: Oil Well Gas Well Other	8. Well Number #1
2. Name of Operator	9. OGRID Number
Spindletop Oil & Gas Co.	212092
3. Address of Operator	10. Pool name or Wildcat
12850 Spurling Rd. Suite 200 Dallas, TX 75230	Loving North, Morrow
4. Well Location	
Unit Letter J : 2310 feet from the south line and 19	650 feet from the east line
Section 15 Township 23S Range 28E	NMPM Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	TVIVI IVI Eddy County
3006'GR	
	Annual Control of the Mary and the Mary
12. Check Appropriate Box to Indicate Nature of Notice, F	Penort or Other Data
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data	
NOTICE OF INTENTION TO: SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK	
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRIL	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT	<u> </u>
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM	
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.	
Dun't a manifestation of this mail and 6/20/17 Operator managed of the relation of mala 10 15 05 0	
During an inspection of this well on 6/30/17 Operator was notified of its violation of rule 19.15.25.8	
On 9-22-17 Operator's Director of Land spoke with Mr. Gilbert Cordero about Operator's desire to bring the well back into production,	
and which will require remedial work. Operator is requesting a 90 day period to formulate and submit plans for the remedial work necessary to bring the well into production, with Operator to submit the detailed work plan to the OCD's office via supplemental sundry	
notice within the requested time period.	
notice within the requested time period.	
During that same inspection, Operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection, Operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection, Operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection, Operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection, Operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection is sufficiently also in the operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection is sufficiently also in the operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection is sufficiently also in the operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection is sufficiently also in the operator was also notified of its violation of rule 19.15.16.8 beautiful that same inspection is sufficiently also in the operator was also not the operator will be also in the operator will b	cause Operator's name was not legible on the
well sign. That violation has been corrected and Operator's name is now legible on the well	
Spud Date: Rig Release Date:	
<u> </u>	
	11.11.0
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE Operations Supervisor	DATE 09-27-17
, The operations supervisor	
Type or print nameDavid Owen E-mail address:dowen@spindletop	poil.com_ PHONE: 972-644-2581
For State Use Only	<del>-</del> -
APPROVED BY: TITLE STAFF Mg	DATE/0-6-17
Conditions of Approval (if any):	D1111111111111111111111111111111