

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
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-015- 44538 44647
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 CHISHOLM ENERGY OPERATING, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 801 CHERRY STREET, SUITE 1200-UNIT 20 FORT WORTH, TX 76102		7. Lease Name or Unit Agreement Name DARK CANYON 15-22 STATE COM 3BS
4. Well Location Unit Letter <u>D</u> : <u>130</u> feet from the <u>NORTH</u> line and <u>720</u> feet from the <u>WEST</u> line Section <u>15</u> Township <u>23S</u> Range <u>26E</u> NMPM <u>EDDY</u> County		8. Well Number 4H (319915)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3326		9. OGRID Number 372137
		10. Pool name or Wildcat PURPLE SAGE, WOLFCAMP (98220) 87980 Narrow Bone Spring, South

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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <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 type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: COMPLETIONS <input checked="" type="checkbox"/>	
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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.

06/07/2018-RAN CBL; EST TOC @ 1626
 06/08/2018-PBTD @ 1589'
 06/09/2018-PRESSURE TEST PROD CSG TO 9808 PSI FOR 30 MIN; GOOD TEST
 PERFORATE STAGE 1, 15815'-15690'
 06/18-07/02/2018-COMPLETE PERFORATIONS STAGE 2-21, 15660'-8610'; FRACTURE W/894 BBLs HCI
 +152943 BBLs SW W/7053202# 100 MESH + 4005679# 20/40 SAND
 07/06-07/08/2018-DRILL OUT
 07/16/2018-INSTALL WELLHEAD & PRODUCTION TREE
 07/18/2018-TURN WELL TO FLOWBACK

**NM OIL CONSERVATION
 ARTESIA DISTRICT**

JUL 24 2018

RECEIVED

Spud Date: 05/07/2018

Rig Release Date: 05/31/2018

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

SIGNATURE Jennifer Elrod TITLE SR. REGULATORY TECH DATE 07/24/2018

Type or print name JENNIFER ELROD E-mail address: jelrod@chisholmenergy.com PHONE: 817-953-3728

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____