

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. 30-015-43990
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 Kaiser-Francis Oil Company		6. State Oil & Gas Lease No. -
3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468		7. Lease Name or Unit Agreement Name Willow Lake WC 15
4. Well Location Unit Letter <u>L</u> : <u>1930</u> feet from the <u>South</u> line and <u>220</u> feet from the <u>West</u> line Section <u>14</u> Township <u>24S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		8. Well Number 001H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2995 GR		9. OGRID Number 12361
		10. Pool name or Wildcat Purple Sage Wolfcamp Gas Pool

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

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> 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: <u>Completion</u> <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.

Completion began 5/10/18 Completion finished 11/7/18

- MIRU WL. TCP's first stage @ 15354'-15476'. Broke down perms.
- Set CIBP @ 10600'.
- Perf'd sqz holes @ 10005'-10009'. Could not pump into.
- Set cmt ret @ 9800'. Perf'd sqz holes @ 9780'.
- Set cmt ret @ 9580'. Perf'd sqz holes @ 9500'.
- Set cmt ret @ 9200'.
- Set cmt ret @ 8200'. Sqz'd w/125 sxs cmt w/5 sxs cmt on top.

RECEIVED

JAN 09 2019

DISTRICT II-ARTESIA O.C.D.

Spud Date: 2/15/18 Rig Release Date: 4/21/18

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

SIGNATURE *Charlotte Van Valkenburg* TITLE Mgr., Regulatory Compliance DATE 1/8/19  
 Type or print name Charlotte Van Valkenburg E-mail address: Charlotv@kfoc.net PHONE: 918-491-4314  
**For State Use Only**

APPROVED BY: *Debra* TITLE compliance officer DATE 4-24-19  
 Conditions of Approval (if any):