

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. 30-015-45775
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 SALT DRAW 10 STATE COM WCA
4. Well Location Unit Letter A : 260 feet from the NORTH line and 1290 feet from the EAST line Section 10 Township 25S Range 28E NMPM EDDY County		8. Well Number 3H (325122)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2977.7		9. OGRID Number 372137
		10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (98220)

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

06/25/2019-PBTD @ 14,040; RAN CBL; EST TOC @ 6390

06/26/2019-RIH; SET CBP @ 14025'; TEST PROD CSG TO 9800 PSI, 30 MIN, GOOD TEST; PERFORATE STAGE 1 @ 14010'-13830'

06/28-07/02/2019- PERFORATE STAGES 2-21 @ 13800'-9637'; FRACTURE ALL STAGES W/511 BBLS HCl + 130676 BBLS SW W/42226431# 100 MESH + 2398023# 40/70 SAND

07/03-07/04/2019- DRILL OUT

07/06/2019-INSTALL PRODUCTION EQUIPMENT

07/09/2019-BEGIN FLOWBACK

RECEIVED

RECEIVED

AUG 06 2019

JUL 12 2019

DISTRICT II-ARTESIA O.C.D.

DISTRICT II-ARTESIA O.C.D.

Spud Date:

04/28/2019

Rig Release Date:

05/21/2019

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 07/11/2019

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

For State Use Only

APPROVED BY: Raymond H. Rodary TITLE Geologist DATE 8-8-17

Conditions of Approval (if any):