

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

RECEIVED State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

AUG 10 10 00 AM
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
DISTRICT II - ARTESIA

WELL API NO.	30-015-21227
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	23841
7. Lease Name or Unit Agreement Name	Mobil Federal
8. Well Number	001
9. OGRID Number	148394
10. Pool name or Wildcat	South Carlsbad Morrow
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3226.7' GR	

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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Vernon E. Faulconer, Inc.	
3. Address of Operator PO Box 7995, Tyler, TX 75711	
4. Well Location Unit Letter <u>F</u> : <u>1980</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>West</u> line Section _____ Township _____ Range _____ NMPM _____ County _____	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3226.7' GR	

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 checked="" 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: <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.

See attached Site Reclamation Plan. Please contact us to schedule an on-site inspection to go over the specific requirements for site reclamation.

Contact information: Chris Nakvinda - Office: 580-883-2892 or Cell: 580-542-2363

Email: cnakvinda@vefinc.com

Karen Charles - Office: 903-581-4382 Email: kcharles@vefinc.com

Accepted for record - NMOCD

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 Karen Charles TITLE Production Analyst DATE 8/13/19

Type or print name Karen Charles E-mail address: kcharles@vefinc.com PHONE: 903-581-4382

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Vernon E. Faulconer, Inc.

Site Reclamation Plan

Mobil Federal #1 – State Lease # 23841

API# 30-015-21227; Unit F, Sec 25, T23S, R26E

1980' FNL, 1980' FWL - Eddy County, NM

1. All surface equipment and debris has been removed.
2. Rock will be ripped and used for water-bars in order to prevent erosion.
3. Soil will be ripped and reseeded with an approved seed mixture, crimped and mulched. (State Land Office to provide approved mixture and rates)
4. If required, road will be ripped, reseeded and entrance will be closed.
5. Water bars will be constructed if required by the State Land Office.
6. Noxious Weeds will be treated and monitored per NMSLO requirements.
7. VEFI will monitor the site annually after the reclamation per NMSLO guidelines.