

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30 015 36400
5. Indicate Type of Lease STATE FEE X
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Lakewood 28
8. Well Number 1
9 OGRID Number 194266
10. Pool name or Wildcat Lakewood Morrow

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 Gas Well X Other
2 Name of Operator Rubicon Oil & Gas, LLC
3. Address of Operator 508 W. Wall, Suite 500, Midland, TX 79701

4. Well Location Unit Letter L : 1600' feet from the South line and 660' feet from the West line Section 28 Township 19S Range 26E NMPM Eddy County	11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR
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Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type	Depth to Groundwater	Distance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness:	mil	Below-Grade Tank: Volume	bbls: Construction Material

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	PLUG AND ABANDON
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS X
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS	P AND A <input type="checkbox"/>
CASING/CEMENT JOB	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Change in intermediate casing to be utilized:

11" hole, propose to run 8 5/8" 28#, K55, STC casing to 1600' and cement to surface with 500 sx Cl C, Interfile lite 11.9 ppg, 2.47 ft 3/sk yield w/ 1/8# poly flake + 250 sx Cl C, 14.8 ppg, 1.35 ft3/sk yield w/2% CaCl, circulating to surface.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines X, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Regulatory Agent DATE 7-1-08

Type or print name: Ann E. Ritchie E-mail address: ann.ritchie@wtor.net Telephone No. 432 684-6381
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any):

Accepted for record - NMOCD