

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

Rec'd 05/26/2020 - NMOCD

Form C-103
 Revised July 18, 2013

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

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| 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. 30-005-64336 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator Tamaroa Operating, LLC | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator PO Box 866937, Plano, Tx 75086-6937 | | 7. Lease Name or Unit Agreement Name Bonanza |
| 4. Well Location Unit Letter <u>A</u> : <u>330</u> feet from the <u>N</u> line and <u>990</u> feet from the <u>E</u> line Section <u>21</u> Township <u>7S</u> Range <u>28E</u> NMPM County | | 8. Well Number 2H |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3977 GR | | 9. OGRID Number 328666 |
| 10. Pool name or Wildcat Elkins, SA | | |

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

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| 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: Completion Amended Report to include casing tests <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.

3/19/2020: Elite Well Service pumped water to pressure test 5 1/2" casing from surface to 6915' w/ 1500 psi for 30 minutes, test OK. Open toe sleeve @ 4560 psi. The toe was acidized w/4560 gallons of 15% NEFE acid flused with 300 bbls water.

3/23 to 25/2020: Elite Well Services fracked the well in 23 stages from 2705 to 6820' with 44936 bbls fresh water gel carrying 1,302,727 lbs 20/40 white sand and 469,468 lbs 20/40 RC sand. After the job a kill plug was set @ 1400'.

3/31 to 4/2/20: MIRU drill out equipment. Test 5 1/2" casing from surface to 1400' w/ 2000 psi for 30 minutes, Test OK. Drill out frack plugs

4/27/20: RIH w/ PC Pump Stator and 2 7/8" L-80 tubing, set pump @ 2504'. Run pump rotor and 1" rods. Start pumping well at 6:45 pm 4/27/20.

Spud Date: June 14, 2019

Rig Release Date: February 3, 2020

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

SIGNATURE  TITLE Consultant DATE 5/25/20

Type or print name Phelps White E-mail address: pwiv@zianet.com PHONE: 575 626 7660

For State Use Only

APPROVED BY:  TITLE Staff Mgr DATE 5/26/2020
 Conditions of Approval (if any):