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

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

Form C-103
June 19, 2008

WELL API NO. 30-015-38504	
5. Indicate Type of Lease STATE ☒ FEE ☐	
6. State Oil & Gas Lease No. V-186	
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 ☐ Other	7. Lease Name or Unit Agreement Name Rock Island 16 State 8. Well Number #2H
2. Name of Operator Nadel and Gussman HEYCO, LLC	9. OGRID Number 258462
3. Address of Operator P.O. Box 1936, Roswell, NM 88202	10. Pool name or Wildcat Glorieta
4. Well Location Unit Letter D : 510' feet from the North line and 330' feet from the West line Section 16 Township 18S Range 26E NMPM EDDY County	
	11. Elevation *(Show whether DR, RKB, RT, GR, etc.)* 3381.6' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
DOWNHOLE COMMINGLE ☐			
OTHER: ☐		OTHER: Name Change ☒	

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.

Please Note that the Well name should be Rock Island 16 State #2H please change on your system reflecting that...

RECEIVED
MAR 29 2012
NMOCD ARTESIA

11/26/11	
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 Tammy R. Link TITLE _____ DATE 3-28-2012

Type or print name: Tammy R. Link E-mail address: tlink@heycoenergy.com PHONE: 575-623-6601

For State Use Only

APPROVED BY: K Dade TITLE Dist II Supervisor DATE 04/02/2012

Conditions of Approval (if any):