

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

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

Form C-103
Revised August 1, 2011

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. 30-015-02052
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> Injection		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Quantum Resources Management, LLC		6. State Oil & Gas Lease No. 647
3. Address of Operator 1401 McKinney Street, Suite 2400, Houston, TX 77010		7. Lease Name or Unit Agreement Name State 647 AC 711
4. Well Location Unit Letter <u> N </u> : <u> 990 </u> feet from the <u> South </u> line and <u> 1650 </u> feet from the <u> West </u> line Section <u> 27 </u> Township <u> 18S </u> Range <u> 28E </u> NMPM <u> Eddy </u> County		8. Well Number 92
		9. OGRID Number 184860
		10. Pool name or Wildcat Artesia (Q-G-SA)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3569' GL		

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

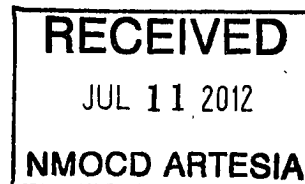
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE 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"/>			
OTHER: <input type="checkbox"/>		OTHER: Mechanical Integrity Test <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.

Annual Mechanical Integrity Test failed 06/13/12.

07/02/12-Well cleaned out to 2825'. RU Hydro-test. PU plastic-coated AD-1 tension pkr. TIH, test tbg to 5000 psi. Bottom jt. had hole, rest of tbg tested. Replaced 1 jt. RD testers. ND BOP, NU WH. Circ pkr fluid around, unflanged well, set pkr@2102'-pulling 10 pts. into pkr. Flanged-up WH, test csg to 500 psi, leaked-off 45 psi/30 min. Unflanged WH, pulled 18 pts. into pkr, flanged-up WH & re-tested to 500 psi on csg. Well tested, RDMO

NMOCD Artesia office, Richard Inge, witnessed test, took chart.



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 Celeste G. Dale TITLE Sr. Regulatory Analyst DATE 07/10/12

Type or print name Celeste G. Dale E-mail address: cdale@gracq.com PHONE: 432-683-1500
For State Use Only

APPROVED BY: Richard Inge TITLE Compliance Officer DATE 7/18/12
Conditions of Approval (if any):