Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> = (575) 393-6161	Energy, Minerals and Natural Resour	rces Revised July 18, 2013
1625 N. French Dr., Hobbs. NM 88240 District II – (575) 748-1283		WELL API NO. 30-005-64180
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISIO	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE S FEE
<u>District IV</u> = (505).476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505 J		V0-9290
SÜNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG-BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		Kobe 22
PROPOSALS.) 1. Type of Well: Oil Well: Gas Well: Other		8. Well Number #1
2 Name of Community	apeno Corporation	9. OGRID Number 26307
Ę	D. Box 1608	10. Pool name or Wildcat
1 4	euquerque, NM 87103	Wolflake; San Andres, S.
4. Well Location		
Unit Letter E:	2195 feet from the North line a	and 330 feet from the West line
Section 22	1 2 0	-E : NMPM . County Chaves
	11. Elevation (Show whether DR, RKB, RT, O	
	<u>NI</u>	
2. Check	Appropriate Box to Indicate Nature of N	lotice, Report or Other Data
NOTICE OF IN	ITENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIA	
TEMPORARILY ABANDON 📋		ICE DRILLING OPNS. P AND A
PULL OR ALTER CASING BOMBING COMMINGER BOMBING C	MULTIPLE COMPL CASING/	CEMENT JOB
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
OTHER:	OTHER:	Spudded well
		tails, and give pertinent dates, including estimated date
of starting any proposed we proposed completion or rec	ork). SEE RULE 19.15.7.14 NMAC. For Mult	iple Completions: Attach wellbore diagram of
g.		
<u>AMENDED</u>		
2/26/2014 Spudo	ded well. Drilled down to 5	'GL.
26. 18. 18. 18.		
特征 計		
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년 10 10 10		•
it.		f
Spud Date:	Rig Release Date:	1
Thereby certify that the information	above is true and complete to the best of my kn	owledge and belief.
· ^ a		
SIGNATURE Jun Do	Mack TITLE Oil & Gas Ope	rations Associate DATE 3/03/2014
Type or print name ' Jun ,Barr	cack E-mail address: jbarract	k@jalapenocorp.comPHONE: 505-242-2050
For State Use Only		1
AND THE	(18)	DATE 3/6/2014
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE STUICOTT
		: