

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

Form C-103  
Revised July 18, 2013

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

WELL API NO. <b>30-015-40629</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Choate Davis 14 State</b>
8. Well Number <b>#1 SWD</b>
9. OGRID Number <b>277558</b>
10. Pool name or Wildcat <b>SWD; ABO/Wolfcamp/Cisco</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3512' GL</b>

**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 Injection Well ☐

2. Name of Operator  
**Lime Rock Resources II-A, L.P.**

3. Address of Operator  
**Heritage Plaza, 1111 Bagby St., Ste. 4600, Houston TX 77002**

4. Well Location  
Unit Letter **J** : **2310** feet from the **South** line and **1650** feet from the **East** line  
Section **14** Township **18-S** Range **27-E** NMPM **Eddy** County

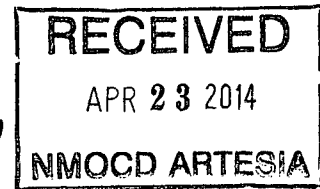
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input checked="" type="checkbox"/>		OTHER: <input 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.

Run MIT 500+psi for 30 minutes with recorder, Original chart submitted to NMOCD 04/23/2014. Request approval to begin injection. Copy of chart submitted with C-103.

- SWD ORDER 1352-A  
- COMPLETION REPORT C105 REQUIRED  
- TUBING INFORMATION AND POSITION OF PACKER REQUIRED.



Spud Date:

02/20/2014

Rig Release Date:

04/19/2014

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

SIGNATURE

*Jerry Smith*

TITLE

Assistant Production Supervisor

DATE April 23, 2014

Type or print name

Jerry Smith

E-mail address:

jsmith@limerockresources.com

PHONE:

575-365-9724

For State Use Only

APPROVED BY:

*Richard Ince*

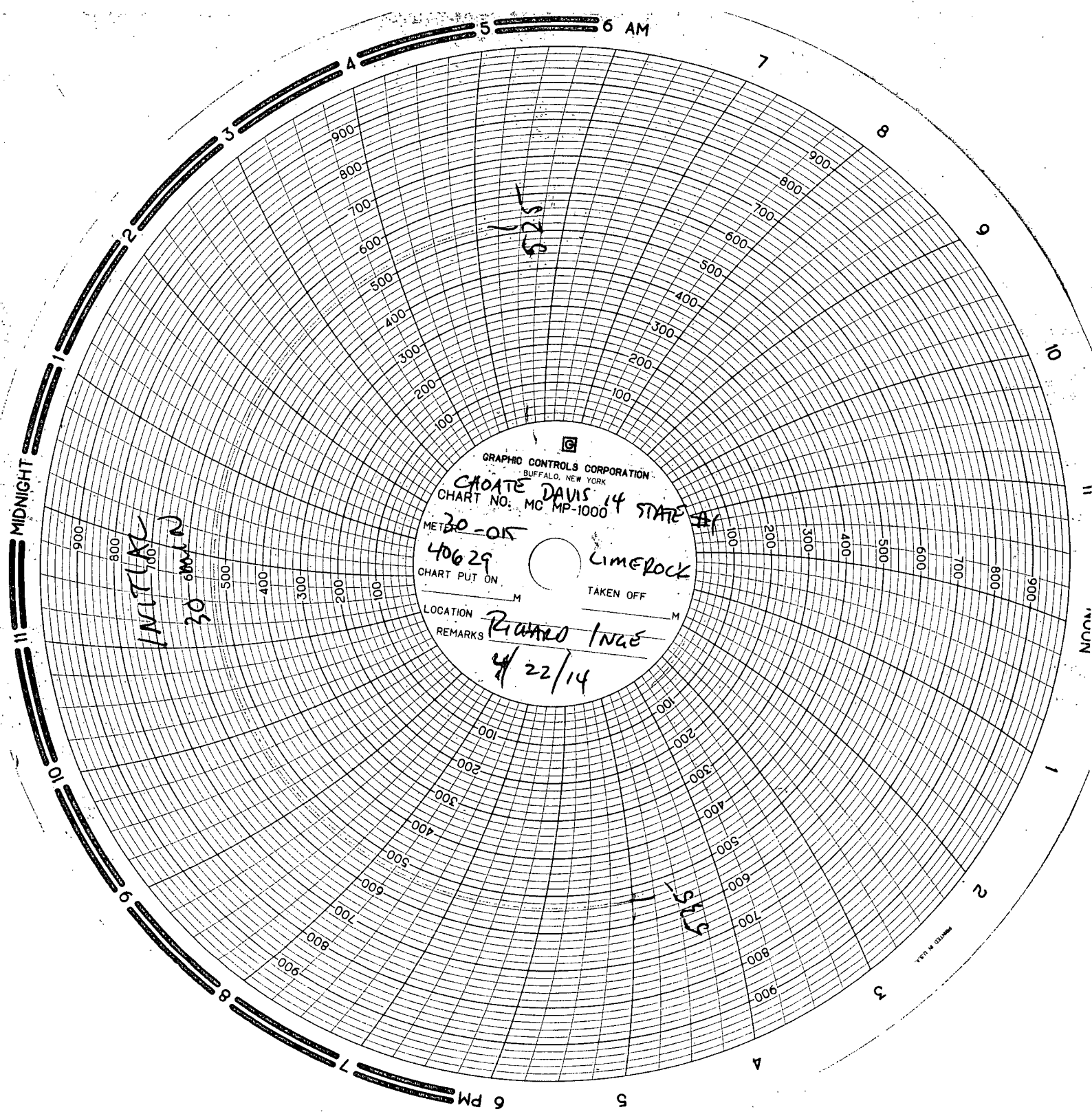
TITLE

Compliance Officer

DATE

4/25/14

Conditions of Approval (if any):



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

CHART NO. MC MP-1000

MET 30-015

40629

CHART PUT ON

Limerock

TAKEN OFF

LOCATION

REMARKS

RUMBLE INGE

4/22/14