

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. <b>30-005-64158</b>
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 checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>JALAPENO CORPORATION</b>		6. State Oil & Gas Lease No. <b>V0-9295</b>
3. Address of Operator <b>PO BOX 1608 ALBUQUERQUE, NM 87103</b>		7. Lease Name or Unit Agreement Name <b>DAWG</b>
4. Well Location Unit Letter <b>H</b> : <b>2225</b> feet from the <b>NORTH</b> line and <b>704</b> feet from the <b>EAST</b> line Section: <b>21</b> Township: <b>9-S</b> Range: <b>27-E</b> NMPM County: <b>CHAVES</b>		8. Well Number <b>#1</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3858' GL</b>		9. OGRID Number <b>26307</b>
		10. Pool name or Wildcat <b>WILDCAT; SAN ANDRES</b>

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 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.

1/10/14 Perforated 2035-2042 with 500 gallons of 20% HCl. 8 shots @ 1sht/ft.

1/17/14 Perforated 2044-2050 with 2200 gallons of 20% HCl. 16 shots @ 1sht/ft.

Spud Date:

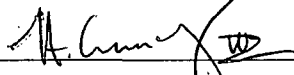
6/3/2013

Rig Release Date:

2/10/14

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

SIGNATURE



TITLE VICE PRESIDENT

DATE 4/23/2014

Type or print name

H. EMMONS YATES, III

E-mail address:

eyates@jalapenocorp.com

PHONE:

505-242-2050

For State Use Only

APPROVED BY:



TITLE



DATE

5/22/14

Conditions of Approval (if any):