

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. 30-015-23709
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 15367
7. Lease Name or Unit Agreement Name State MA Com No. 001
8. Well Number 1
9. OGRID Number 020847
10. Pool name or Wildcat Willow Lake (Bone Spring)

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 Salt Water Disposal Well

2. Name of Operator
Endeavor Energy Resources, LP

3. Address of Operator
110 N. Marienfeld Street, Suite 200, Midland, Texas 79701

4. Well Location
Unit Letter H : 1980 feet from the North line and 660 feet from the East line
Section Township Range NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2997.9' 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <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.

Bradenhead Test was run on the State MA Com # 1 SWD on 4/14/2015, passed and Richard Ingle was not on location to witness but told us to run test and turn in original chart of the test.

9/25/15 - HOLDING UP THIS C103 BECAUSE IT DID NOT STATE WHAT REPAIRS WERE PERFORMED. OP SAID REPORT SENT THRU BLM SUNDRY. AS OF TODAY, NOT YET RECEIVED.

RECEIVED

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 Jan South TITLE REG. ANALYST DATE 4-16-2015
Type or print name Jan South E-mail address: JSOUTH@EERONLINE.COM PHONE: 432-687-1575
For State Use Only
APPROVED BY: Richard Ingle TITLE COMPLIANCE OFFICER DATE 9/25/15

6 P.M. 7 8 9 10 11

MIDNIGHT

1 2 3 4 5 6

5 A.M.

1 2 3 4 5 6 7 8 9 10 11 NOON

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

BR 2221

REST

4/14/13

Endurance Res

State M R Camp 1210

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Endurance Res

Meter Calibration
Wildcat Measurement Services
SER.# 16531-14/710323
6-12-2014