

Submit 1 Copy To Appropriate District Office

State of New Mexico  
Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

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

**NEW MEXICO OIL CONSERVATION DIVISION**  
ARTESIA DISTRICT  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

JAN 29 2018  
RECEIVED

WELL API NO. 015-21383
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-7075
7. Lease Name or Unit Agreement Name Pan Am State
8. Well Number 3X
9. OGRID Number 371484
10. Pool name or Wildcat E. Empire Yates SR
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3682' GR

**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

2. Name of Operator  
Rover Operating, LLC

3. Address of Operator  
17304 Preston Rd, Suite 740, Dallas, TX 75252

4. Well Location  
Unit Letter I : 2310 feet from the south line and 990 feet from the east line  
Section 28 Township 17S Range 28E NMPM Eddy County

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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: Return to production <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.

6/9/2017: MIRU; TOH w/pump & rods; TIH w/redressed pump & rods; Space out & hang on; Load tbg; Good PA; Clean location; RD; Return well to production.

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 Connie Swan TITLE Regulatory Administrator DATE 1/22/2018

Type or print name Connie Swan E-mail address: csswan@swanderlandok.com PHONE: (918) 621-6533

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Mgr DATE 1-29-18  
Conditions of Approval (if any):