

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

| | | |
|--|--|---|
| 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.) | | WELL API NO. 30-015-45043 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator WPX ENERGY PERMIAN, LLC | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 3500 ONE WILLIAMS CENTER, MD: 35, TULSA, OK 74172 | | 7. Lease Name or Unit Agreement Name CASS DRAW 10-23-27 FEE |
| 4. Well Location Unit Letter <u>H</u> : <u>2,691</u> feet from the <u>NORTH</u> line and <u>338</u> feet from the <u>EAST</u> line Section <u>9</u> Township <u>23S</u> Range <u>27E</u> NMPM County <u>EDDY</u> | | 8. Well Number <u>401H</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3,142 RKB</u> | | 9. OGRID Number <u>246289</u> |
| 10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS) | | |

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

| | |
|--|---|
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/> | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: COMPLETION <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.

Please be advised that the above referenced well has been completed as follows:

Rig Released: 11/15/2018; Completion Began: 02/09/2019; Frac Began: 02/21/2019; Drillout Ended: 03/01/2019; DOFP: 03/04/2019
 KOP @ 8,840' MD
 14,018' TMD, 9,135' TVD & 13,931' PBD
 GR Log ran to surface.
 Frac Data: Perfs @ 9,447' to 13,878' (16 stages)
 8,949,273 TL FLUID, 13,360,660 TL PROPPANT
 2 7/8" Tubing Installed 03/02/2019 @ depth of 8,966' MD and a 4 1/2" 10K AS-1X Packer @ 8,956'

RECEIVED

APR 01 2019

DISTRICT II-ARTESIA O.C.D.

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 Lorri Kline Digitally signed by Lorri Kline
 DN: cn=Lorri Kline, o=ou,
 email=LORRI.KLINE@WPXENERGY.CO
 M, c=US
 Date: 2019.03.27 12:59:10 -0500 TITLE REGULATORY TECH II DATE 03/26/2019

Type or print name LORRI KLINE E-mail address: lorri.kline@wpxenergy.com PHONE: 539-573-3518

For State Use Only
 APPROVED BY: Haven Sharp TITLE Staff Mgr DATE 4-18-19
 Conditions of Approval (if any):