

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. 30-015-45274
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 FRONTIER 32-23-26 STATE
8. Well Number 431H
9. OGRID Number 246289
10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)

NM OIL CONSERVATION
ARTESIA DISTRICT
 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.)
 MAR 18 2019

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	RECEIVED
2. Name of Operator WPX ENERGY-PERMIAN, LLC	
3. Address of Operator 3500 ONE WILLIAMS CENTER, MD: 35, TULSA, OK 74172	
4. Well Location Unit Letter <u>P</u> : <u>248</u> feet from the <u>SOUTH</u> line and <u>350</u> feet from the <u>EAST</u> line Section <u>32</u> Township <u>23S</u> Range <u>26E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,463 RKB	

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"/> Completion/Tubing Install/ Date 1st produced (DOFP) OTHER: <input checked="" type="checkbox"/>
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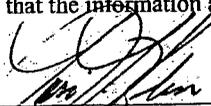
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Please be advised that the above mentioned well was completed as follows:

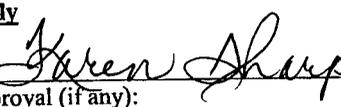
Rig Released: 12/11/2018
 Completions Began: 01/02/2019
 PBD @ 13,594' MD
 Ran MWD/GR Logs to Surface
 Frac Data: Perfs @ 9,154' to 13,547' (16' stages)
 10, 446,093 TL Fluid, 12,809,025 TL Proppant
 2 7/8" Tubing Installed 02/24/2019 @ depth of 8,107 and Packer @ 8,100

Spud Date: 11/26/2018 Rig Release Date: 12/11/2018

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

SIGNATURE  TITLE REGULATORY TECH II DATE 03/14/2019

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

For State Use Only
 APPROVED BY  TITLE Staff Mgr DATE 4-16-19
 Conditions of Approval (if any):