

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

Revised July 18, 2013

WELL API NO.

30-015-43995

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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7. Lease Name or Unit Agreement Name

Willow Lake WA 15

8. Well Number 001H

9. OGRID Number

12361

10. Pool name or Wildcat

Purple Sage Wolfcamp Gas Pool

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

Kaiser-Francis Oil Company

3. Address of Operator

P. O. Box 21468, Tulsa, OK 74121-1468

4. Well Location

Unit Letter L : 1960 feet from the South line and 220 feet from the West line
Section 14 Township 24S Range 28E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

2990 GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐CLOSED-LOOP SYSTEM ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☒OTHER: ☐

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. Casing detail:

3/7/18 20", 94#, J55 set @ 375' & cmt'd w/851 sxs. TOC @ surface.

3/13/18 13 3/8", 72#, L80 set @ 2735' & cmt'd w/ 2047 sxs. TOC @ Surface.
Pressure tested to 500#.3/21-3/22/18 9 5/8", 53.5#, P110 set @ 9088' & cmt'd w/989 sxs. TOC @ 5506'.
Pressure tested to 1500#.4/5-4/6/18 5 1/2", 20#, P110 set @ 14729' & cmt'd w/3149 sxs. TOC @ 9050'.
Pressure tested to 9500#.

Spud Date:

3/6/18

Rig Release Date:

4/6/18

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

SIGNATURE Charlotte Van Valkenburg TITLE Mgr., Regulatory Compliance DATE 8/7/18Type or print name Charlotte Van Valkenburg E-mail address: Charlotv@kfoc.net PHONE: 918-491-4314

For State Use Only

APPROVED BY: Daniel TITLE Compliance Officer DATE 8-24-18

Conditions of Approval (if any):