

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 APINO: 30-015-24308
1. Type of Well: Oil Well ☐ Gas Well ☒ Other ☐		5. Indicate Type of Lease STATE ☒ FEE ☐
2. Name of Operator Vernon E. Faulconer, Inc.		6. State Oil & Gas Lease No. 23900
3. Address of Operator P.O. Box 7995, Tyler, TX 75711		7. Lease Name or Unit Agreement Name State K-3328
4. Well Location Unit Letter: C : 660 feet from the North line and 2080 feet from the West line Section 36 Township 23S Range 26E NMPM Eddy County		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3217.8' GR		9. OGRID Number 148394
		10. Pool name or Wildcat South Carlsbad Morrow

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
DOWNHOLE COMMINGLE ☐			
CLOSED-LOOP SYSTEM ☐			
OTHER: ☐		OTHER: Resume Production ☒	

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.

We are resuming production. We have put this unit BOL.

RECEIVED

JUN 04 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

Karen Charles

TITLE Production Analyst

DATE 5/29/19

Type or print name: Karen Charles

E-mail address: kcharles@vefinc.com

PHONE: 903-581-4382

For State Use Only

APPROVED BY:

Accepted for Record

TITLE

DATE 6-7-19

Conditions of Approval (if any):