

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) 476-3466
 1220 S. St. Francis Dr., Santa Fe, NM 87505

RECEIVED State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

JUN 20 2019 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
DISTRICT II - ARTESIA OCS

WELL API NO.	30-005-60520
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	K-2114
7. Lease Name or Unit Agreement Name	LE Ranch 16
8. Well Number	9
9. OGRID Number	372241
10. Pool name or Wildcat	Chisum East, San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3,676

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
Quatro Osos E&P, LLC

3. Address of Operator
P.O. Box 1213; Roswell, NM 88202-1213

4. Well Location
 Unit Letter **K** : **2,200** feet from the **S** line and **1,650** feet from the **W** line
 Section **16** Township **11S** Range **218E** NMPM **Chaves** County

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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: Abort TA status, return to production <input checked="" type="checkbox"/>		OTHER: <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.

8-5/8" CIBP set at 1,990' on 11/17/2001 which is 99 feet above top perforation.

Propose to pressure test casing to 500 psi. Upon completion of a successful pressure test, rig up reverse unit and drill out cast iron bridge plug (CIBP), clean and scrap casing to TD (2,400' Driller). Top perfs 2091-2200 bottom perfs 2208-2218 total of 26 perforations.

Run in hole with 2-3/8" tubing to 2050. Set packer and acidize perforations with 15% HCL and 100 ball sealers.

Release packer and swab well to test tank. Upon successful test, place well on rod pump and pumping unit.

Requesting authorization for June 28, 2019 commencement.

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  TITLE **Managing Member** DATE **6-20-2019**

Type or print name _____ E-mail address: **rory@rmcminn.com** PHONE: **575/626-7100**

For State Use Only
 APPROVED BY:  TITLE **STAFF Mgr** DATE **6/25/19**
 Conditions of Approval (if any): _____