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

RECEIVED
DEC 17 2019
DISTRICT II-ARTESIA O.C.D.

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

WELL API NO. 30-015-34963	
5. Indicate Type of Lease STATE FEE X	
6. State Oil & Gas Lease No.	
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 X Other	7. Lease Name or Unit Agreement Name MONTURA FED COM 8. Well Number 002
2. Name of Operator CHISHOLM ENERGY OPERATING, LLC	9. OGRID Number 372137
3. Address of Operator 801 CHERRY ST., SUITE 1200, UNIT 20, FORT WORTH, TEXAS 76102	10. Pool name or Wildcat HAPPY VALLEY, MORROW 78060
4. Well Location Unit Letter P : 1092 feet from the SOUTH line and 994 feet from the EAST line Section 15 Township 22S Range 26E NMPM EDDY County	
11. Elevation *(Show whether DR, RKB, RT, GR, etc.)* 3,314' – GR	

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 X	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 ☐			
OTHER: ☐		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.

Does Not Meet OCD Requirements
Need Subsequent Report of T/A

1) TAG EXISTING 5-1/2" CIBP + CMT. @ +/-11,455'; CIRC. WELL
2) PUMP 25 SXS. CMT. @ 11,113'-10,813' (T/MRRW.).
3) PUMP 50 SXS. CMT. @ 10,537'-10,140' (T/ATOKA, T/STWN.).
4) PUMP 25 SXS. CMT. @ 8,782'-8,602' (T/WCMP.)
5) PUMP 25 SXS. CMT. @ 5,145'-4,995' (T/BNSG.).
6) PUMP 65 SXS. CMT. @ 2,574'-2,098' (8-5/8" CSG.SHOE, T/DLWR.); WOC X TAG CMT. PLUG.
7) PERF. X ATTEMPT TO SQZ. 40 SXS. CMT. @ 551'-451' (13-3/8" CSG.SHOE); WOC X TAG CMT. PLUG.
8) PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 20 SXS. CMT. @ 63'-3'.
9) DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

DURING THIS PROCEDURE WE PLAN TO USE THE CLOSED-LOOP SYSTEM W/ A STEEL TANK AND HAUL CONTENTS TO THE REQUIRED DISPOSAL, PER OCD RULE 19.15.17.

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

SIGNATURE David A. Eyler TITLE: AGENT DATE: 12/05/19

Type or print name: DAVID A. EYLER E-mail address: DEYLER@MILAGRO-RES.COM PHONE: 432.687.3033

For State Use Only

APPROVED BY: DENIED TITLE DENIED DATE 12/12/19 CC

Conditions of Approval (if any):