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District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
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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

DEC 19 2019

State of New Mexico
Energy, Minerals and Natural Resources
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

WELL API NO. 30-005-64332
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Spitfire
8. Well Number 5H
9. OGRID Number 328666
10. Pool name or Wildcat Wildcat, SA

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 Tamaroa Operating, LLC

3. Address of Operator PO Box 866937, Plano TX 75086-6937

4. Well Location
Unit Letter N : 330 feet from the S line and 1650 feet from the W line
Section 2 Township 8S Range 28E NMPM Chaves County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4025 GR

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>CLOSED-LOOP SYSTEM <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: 5 1/2" Casing Pressure Test <input checked="" type="checkbox"/></p>
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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.

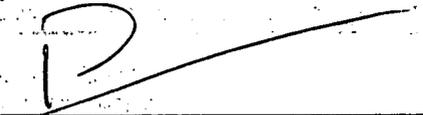
On December 17, A packer and 2 7/8" tubing was run in this well. A tension packer was set at 2281' in the 5 1/2" 17# casing. The backside was loaded with fluid and a casing pressure test was run. Initial pressure was 535 psi. Final 30 minute pressure was 510 psi, a 04.6% drop with most of the drop in the first 4 minutes of the test.

A recorder was used durring the test and the chart is attached.

Spud Date: Rig Release Date:

✓ AB

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

SIGNATURE  TITLE Consultant DATE 12/17/2019

Type or print name Phelps White E-mail address: pwiv@zianet.com PHONE: 575 626 7660

For State Use Only

APPROVED BY:  TITLE Staff mg DATE 12/23/19

Conditions of Approval (if any):

