

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 August 1, 2011

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

WELL API NO. 30-025-23595
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-3290
7. Lease Name or Unit Agreement Name BAUM "E" STATE
8. Well Number 1
9. OGRID Number 190595
10. Pool name or Wildcat DOLLARHIDE QUEEN (018810)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4248' KB

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  
 ENDEAVOR ENERGY RESOURCES, LP

3. Address of Operator  
 110 NORTH MARIENFELD, SUITE 200, MIDLAND, TX 79701

4. Well Location  
 Unit Letter C : 330 feet from the NORTH line and 2310 feet from the WEST line  
 Section 09 Township 14S Range 33E NMPM LEA County

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

SUBSEQUENT REPORT OF:

- REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  P AND A   
 CASING/CEMENT JOB

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.

1. NOTIFY NMOCD 24 HRS. BEFORE MIRU. *Need Current & Proposed WBD*  
 2. MIRU. ND WH, NU BOPE.  
 3. SET CIBP@9780' AND SPOT 25SX OF CLASS "H" CEMENT FROM 9780'-9680'. (PERFS)  
 4. CIRCULATE 9.5 PPG MLF AND TEST CASING.  
 5. PERF AND SQUEEZE 60SX OF CLASS "C" CEMENT FROM 6960'6760'. WOC&TAG. (TUBB)  
 6. PERF AND SQUEEZE 35SX OF CLASS "C" CEMENT FROM 4150'-4050'. WOC&TAG. (SHOE/SA)  
 7. PERF AND SQUEEZE 50SX OF CLASS "C" CEMENT FROM 2665'.2565'. WOC&TAG. (B.SALT)  
 8. PERF AND SQUEEZE 50SX OF CLASS "C" CEMENT FROM 1733'-1633'. WOC&TAG. (T.SALT)  
 9. PERF AND SQUEEZE 60SX OF CLASS "C" CEMENT FROM 6960'6760'. WOC&TAG. (TUBB)  
 10. PERF AND SQUEEZE 75SX OF CLASS "C" CEMENT FROM 412'-312. WOC&TAG. (FW/SHOE)  
 11. SPOT 10SX OF CLASS "C" CEMENT FROM 15'-SURFACE. (SURFACE).  
 12. CUTOFF WELLHEAD, ANCHORS 3' BELOW SURFACE AND INSTALL DRYHOLE MARKER. TURN OVER FOR RECLAMATION.  
 CLOSED LOOP CONTAINMENT SYSTEM WILL BE USED FOR FLUIDS.

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

[Empty box for Rig Release Date]

**RECEIVED**  
 FEB 05 2020

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

**EMNRD-OCD ARTESIA**

SIGNATURE [Signature] TITLE SR. REGULATORY ANALYST DATE 01/24/20

Type or print name JAN SOUTH E-mail address: JSOUTH@EERONLINE.COM PHONE: (432)687-1575

**For State Use Only**

APPROVED BY: [Signature] TITLE [Signature] DATE \_\_\_\_\_

Conditions of Approval (if any):

**DENIED**

**DENIED**