

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

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

WELL API NO. 30-015-00269

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
24945

7. Lease Name or Unit Agreement Name
Fikes

8. Well Number 001

9. OGRID Number 243261

10. Pool name or Wildcat
Glorieta-Yeso

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 Injection Well

2. Name of Operator
Premier Natural Resources, LLC

3. Address of Operator
5727 South Lewis Avenue, Tulsa, OK 74105

4. Well Location

Unit Letter C : 330 feet from the N line and 2045 feet from the W line
Section 35 Township 18S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3315 GF

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

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

OTHER: MIT
☐

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.

Well was MIT'd on January 19, 2011. Test was witnessed by Darold Gray. MIT chart was taken by Darold Grey.

Well passed with 410 # pressure for 30 minutes.



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 Megan T. Wondaal TITLE Regulatory Specialist DATE 1/20/2010

Type or print name Megan T. Wondaal E-mail address: _____ PHONE: 918-392-3242
For State Use Only

APPROVED BY: Richard [unclear] TITLE Compliance Officer DATE 2/7/11