

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 July 18, 2013

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <u>30-025-41904</u> ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
2. Name of Operator <u>Rubicon Oil &amp; Gas, LLC</u>		6. State Oil & Gas Lease No. <u>2604</u>
3. Address of Operator <u>508 West Wall Avenue, Suite 500, Midland, TX 79701</u>		7. Lease Name or Unit Agreement Name <u>Draw State</u> ✓
4. Well Location Unit Letter <u>N</u> : <u>800</u> feet from the <u>South</u> line and <u>1650</u> feet from the <u>West</u> line Section _____ Township _____ Range _____ NMPM _____ County _____		8. Well Number <u>1</u> ✓ 9. OGRID Number <u>194266</u> ✓ 10. Pool name or Wildcat <u>Wildcat</u> ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3332' GL</u>		[98076] WC-025 G-04 S233829N;ABO ✓

OCD - HOBBS  
 08/15/2016  
 RECEIVED

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 checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>		OTHER: <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>			

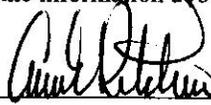
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Well was spudded 11/13/14; 8 3/4" hole w/ 7" production casing set @ 8098' with ~~700~~ 1410 sacks of cement

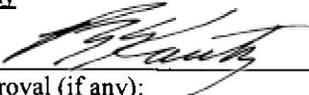
Spud Date: 11/13/14

Rig Release Date: 12/03/14

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

SIGNATURE  TITLE Regulatory DATE 08/09/16

Type or print name Ann E. Ritchie E-mail address: ann.wtor@gmail.com PHONE: 432-684-6381

APPROVED BY:  TITLE Petroleum Engineer DATE 08/15/2016

Conditions of Approval (if any):

*KZ*