

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

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.)		7. Lease Name or Unit Agreement Name Schubert 18 [316520] ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		8. Well Number 4H ✓
2. Name of Operator Forge Energy, LLC [371275] ✓		9. OGRID Number 316520 371275 ✓
3. Address of Operator 10999 IH 10 West, Suite 900 San Antonio, TX 78230		10. Pool name or Wildcat [97353] NADINE,SAN ANDRES, NORTHEAST
4. Well Location Unit Letter <u>O</u> : <u>245</u> feet from the <u>SOUTH</u> line and <u>2405</u> feet from the <u>EAST</u> line Section <u>18</u> Township <u>19S</u> Range <u>39E</u> NMPM County <u>LEA</u> ✓		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3504		

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

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

RAN TOTAL OF 42 JOINTS 9 5/8 J-55 36# LTC CASING SHOE SET @ 1759' FC SET @ 1714'; CENTRALIZERS EVERY THIRD JOINT; WASH EVERY JOINT TO BOTTOM 300 TO 400 GPM. RIG UP HALLIBURTON, TEST LINES TO 3000; TEST OK; PUMP CEMENT JOB AS FOLLOWS: 20 BBLS GEL RED DYE SPACER; LEAD CEMENT: 550 SKS, 12.9 PPG, 1.88 YIELD, 9.3 GAL/SK; TAIL CEMENT: 110 SKS, 14.8 PPG, 1.342 YIELD, 6.43 GAL/SK; 133 BBLS OF FW DISPLACEMENT; LANDED PLUG @ 04:30 WITH 530 PSI; BROUGHT UP TO 1008 PSI AND HELD FOR 5 MINS; FLOATS HELD; GOT 1.5 BBLS BACK FROM LINES; 100% RETURNS THROUGHOUT JOB; CIRCULATED 20 BBLS OR 60 SKS TO SURFACE TIH OPEN ENDED F/SURFACE T/5000' CEMENT PLUG #1 F/5000'T/4800'; TEST LINES TO 2000 PSI PUMP 20BBL FW SPACER; 65 SKS 1.33 YIELD,14.8 PPG,6.31 GAL/SK, DISPLACE W/4.6 BBLS FW DISPLACE W/57.6 BBLS ACTIVE MUD;

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 K. Boyd TITLE OPERATIONS ASSISTANT DATE 9/19/2016

Type or print name KATRINA BOYD E-mail address: KBOYD@FORGENERGY.COM PHONE: 432-524-1301
For State Use Only

APPROVED BY: [Signature] TITLE _____ DATE _____
 Conditions of Approval (if any): _____

KZ