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

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

Form C-103
Revised July 18, 2013

WELL API NO.
**3002544203**

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-0244

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
**WEST EUMONT UNIT**

1. Type of Well: Oil Well ☐ Gas Well ☒ Other

8. Well Number **107**

2. Name of Operator
FORTY ACRES ENERGY, LLC

9. OGRID Number
371416

3. Address of Operator
11777B Katy Freeway, Suite #305, Houston, TX 77079

10. Pool name or Wildcat
EUMONT; Yates-Seven Rivers-Queen (Oil)

4. Well Location
Unit Letter M : 1285 feet from the South line and 1310 feet from the West line
Section 1 Township 21S Range 35E NMPM LEA County

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
3567' GR

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

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|---|---|
| PERFORM REMEDIAL WORK ☐ | PLUG AND ABANDON ☐ | REMEDIAL WORK ☐ | ALTERING CASING ☐ |
| TEMPORARILY ABANDON ☐ | CHANGE PLANS ☐ | COMMENCE DRILLING OPNS. ☐ | P AND A ☐ |
| PULL OR ALTER CASING ☐ | MULTIPLE COMPL ☐ | CASING/CEMENT JOB ☐ | |
| DOWNHOLE COMMINGLE ☐ | | | |
| CLOSED-LOOP SYSTEM ☐ | | | |
| OTHER: **CHANGE TO ORIGINAL APD** ☒ | | 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.

CHANGE WELL NAME

Change From: WEST EUMONT UNIT #107 TO **WEST EUMONT UNIT #114**

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 _____ TITLE Geologist DATE 02/06/2018

Type or print name Jessica LaMarro E-mail address: jessica@faenergyus.com PHONE: 832-706-0051

**For State Use Only**

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