

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.)		WELL API NO. 30-025-44202
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 AMEREDEV OPERATING, LLC		6. State Oil & Gas Lease No. 320055
3. Address of Operator 5707 SOUTHWEST PKWY., BLDG. 1 AUSTIN, TX 78735		7. Lease Name or Unit Agreement Name AMEN CORNER 26 36 27 STATE COM
4. Well Location Unit Letter M : 230 feet from the SOUTH line and 290 feet from the WEST line Section 22 Township 26S Range 36E NMPM County LEA		8. Well Number 111H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2911 GL		9. OGRID Number 372224
		10. Pool name or Wildcat WC-025 G-09 S263619C; WOLFCAMP

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

AMEREDEV OPERATING, LLC would like to request a one-year extension of the drilling permit for the AMEN CORNER 26 36 27 STATE COM 111H.

APD EXPIRES 11/16/2020

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 Christie Hanna TITLE REGULATORY COORDINATOR DATE 11/8/19

Type or print name Christie Hanna E-mail address: channa@ameredev.com PHONE: 77-300-4700

For State Use Only

APPROVED BY: [Signature] TITLE DATE 11/08/2019
Conditions of Approval (if any):