

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

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. 30-025-26920
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 Grizzly Energy, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 5847 San Felipe St., Suite 3000, Houston, TX 77057		7. Lease Name or Unit Agreement Name Amoco Any State
4. Well Location Unit Letter <u>C</u> : <u>550</u> feet from the <u>North</u> line and <u>1651</u> feet from the <u>West</u> line Section <u>10</u> Township <u>18S</u> Range <u>35E</u> NMPM County <u>Lea</u>		8. Well Number <u>3</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3918 GR		9. OGRID Number 258350
		10. Pool name or Wildcat Buckeye ABO

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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	PNR
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <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.

- 08/31/20 Spot 200 sx cmt @ 7500' WOC.
- 09/01/20 Attempt to test cmt plug, no success, respot 100 sx cmt @ 7500' WOC - pressure test plug ok.
- 09/09/20 Spot 50 sx cmt @ 4820'-4100' disp 16 bls. Tag @ 4160'. Sqz 50 sx cmt @ 3657'-3557' disp 15 bls. Tag @ 3480'.
- 09/10/20 Sqz 50 sx cmt @ 2950'-2850' disp 13 bls. Tag @ 2784'. Sqz 50 sx cmt @ 1850'-1750' disp 9 bls. Tag @ 1664'.
- 09/11/20 Circ 140 sx cmt down 4 1/2 @ 468' up through 8 5/8 & 13 3/8 to surf. Cut off wellhead, back free location. RD P&A equipment. Job completed.

12/9/2020 - PM NMOC

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 Agent DATE 9/14/20

Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600

For State Use Only

APPROVED BY:  TITLE Compliance Officer A DATE 12/9/20

Conditions of Approval (if any)