

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

Received NMOCDD 11/14/20

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. 30-025-29126
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 type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator GRIZZLY OPERATING, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 5847 SAN FELIPE, STE. 3000, HOUSTON, TEXAS, 77057		7. Lease Name or Unit Agreement Name TOBY
4. Well Location Unit Letter _____ H : 1,650 feet from the NORTH _____ line and 990 feet from the EAST _____ line Section 13 Township 24S Range 36E NMPM County: LEA		8. Well Number 2
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,315' (GL)		9. OGRID Number 258350
		10. Pool name or Wildcat JALMAT; TAN-YATES-7 RVRS

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.

10-24-2020 MIRU, SET CIBP @ 2,970'.

10-26-2020 CIRC MUD, CAP w/ 50 SX CLASS C CMT f/ 2,970'-2,477', WOC, TAG @ 2.480', TEST CSG, DID NOT HOLD.

10-28-2020 SPOT 50 SX f/ 1,396'-903', TAG @ 958', PERF @ 443', SQZ 50 SX f/ 443'-343'.

10-29-2020 TAG @ 324', PERF @ 200', SQZ 50 SX f/ 200'-100'.

10-30-2020 TAG TOC @ 120', PERF @ 120', TOP WELL OFF w/ 33 SX f/ 120'-SURFACE, RDMO

12/10/2020 -PM NMOCDD

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 [Signature] TITLE PdA Manager DATE 10-30-20

Type or print name Mike Fuentes E-mail address: mfuentes@vivawsc.com PHONE: 432-557-2494

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 12/10/20

Conditions of Approval (if any):