

Submit 1 Copy To Appropriate District Office

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

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

HOBBS OGD

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

SEP 26 2011

WELL API NO.  
30-025-21497

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Eunice Gas Plant SWD

8. Well Number 1

9. OGRID Number 24650

10. Pool name or Wildcat  
SWD: San Andres

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)

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

2. Name of Operator  
Targa Midstream Services, LP

3. Address of Operator  
1000 Louisiana, Suite 4300, Houston, TX 77002-5036

4. Well Location

Unit Letter L : 2580 feet from the South line and 1200 feet from the West line  
Section 27 Township 22S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3345' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

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.

09/19/2011 - Pulled well to check for leak.

09/21/2011 - Performed successful MIT - see attached chart from test.

09/22/2011 - RDMO

No changes were made to wellbore.

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 Denise Jones TITLE Regulatory Analyst DATE 9-22-11

Type or print name Denise Jones E-mail address: djones@cambrianmgmt.com PHONE: 432-620-9181

For State Use Only

APPROVED BY: [Signature] TITLE STAFF MGR DATE 9-27-2011

Conditions of Approval (if any):

SEP 21 2011

