Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
District 1 – (575) 393-6161 Energy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St. Artesia NM 88210 **POBBSOICE*** ONSERVATION DIVISION	30-025\$-26883
811 S. First St., Artesia, NM 88210 HOBBS QUED ONSER VALION DIVISION District III – (505) 334-6178 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	STATE X FEE
1220 S. St. Francis Dr., Santa Fe, NM	6. State Off & Gas Lease No.
87505 SUNDRY NOTICES AND PEPORTS ON WELLS	7. Lease Name or Unit Agreement Name
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	Eidson Brine Station- BW-004
PROPOSALS.) 1. Type of Well: Oil Well □ Gas Well ☒ Other Brine Station	8. Well Number
2. Name of Operator Wasserhund, Inc.	9. OGRID Number 130851
3. Address of Operator	10. Pool name or Wildcat
P.O. Box 2140 Lovington, NM 88260	
4. Well Location	1.7. Coat Coast the Worth Line
Unit Letter M: 567.4 feet from the South line and 16	1.7 feet from the West line NMPM County Lea
Section 31 Township 16S Range 35E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
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 DR	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	T JOB L
DOWNHOLE COMMINGLE	_
OTHER: Annual Pressure Test OTHER: OTHER: OTHER: ord sive pertinent dates including estimated date	
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.	
restriction .	
Annual Pressure and Integrity Test, set for October 18, 2011	
Spud Date: Rig Release Date:	
Spud Date: Rig Release Date:	
Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowled.	ge and belief.
I hereby certify that the information above is true and complete to the best of my knowled	10/12/2011
	ge and belief. DATE
I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TITLE Secretary/Treasurer	DATE 10/13/2011
I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TITLE Secretary/Treasurer Type or print name Larry Gandy E-mail address: lgandy@gandy@	10/12/2011
I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TITLE Secretary/Treasurer	DATE 10/13/2011 corporation.com PHONE: 575-396-0522