Submit I Copy To Appropriate District Office	State of New Mexico	Form C-1	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2	.011
1625 N French Dr , Hobbs, NM \$8240 BBS Of		WELL API NO. /	İ
District II – (575) 748-1283	OIL CONSERVATION DIVISION	30-025-31956 5. Indicate Type of Lease	
District III _ (505) 334-6178	1220 South St. Francis Dr.	STATE FEE S	/
1000 Rio Brazos Rd , Aztec, NMJ&N 0 <b>2 6</b> 2 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM	•		
87505 RECEIVE	AND REPORTS ON WELLS	7 Lagra Nama or Unit Agramont Nam	
SUNDRY NOTICE  (DO NOT USE THIS FORM FOR PROPOSAL	S AND REPORTS ON WELLS S TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Nam	ا ع.
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		Harrison, B.FC-	1
PROPOSALS)		8. Well Number 1	
1. Type of Well: Oil Well  Gas Well  Other		9. OGRID Number 02799	
2. Name of Operator Breck Operating Corp.		9. OGRID Nulliber 02/99	Ì
3. Address of Operator		10. Pool name or Wildcat	
P.O. Box 911, Breckenridge, TX 76424		N. Teague Lower Paddock – Blin Assoc	
4. Well Location			<del>/ </del>
Unit Letter L: 184	feet from the South line and 670	feet from the West line	
Section 9		7E NMPM Lea County	
	1. Elevation (Show whether DR, RKB, RT, GR, et		10
The second second second second second	1. Elevation (show whether DR, RRD, RT, OR, et		
12 Check Apr	propriate Box to Indicate Nature of Notice	Report or Other Data	
12. Check ripp	propriate Box to maleute reactive of rection	, report of other Butt	
NOTICE OF INTE	ENTION TO: SU	BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK 🗌 🛛 F	PLUG AND ABANDON 🔲 📗 REMEDIAL WO	RK ALTERING CASING	
TEMPORARILY ABANDON 🔲 🔾	CHANGE PLANS COMMENCE, D	RILLING OPNS. P AND A	
PULL OR ALTER CASING \( \square\) \( \mathbb{N} \)	MULTIPLE COMPL   CASING/CEME	NT JOB	
DOWNHOLE COMMINGLE			
OTUED. Democrat TA Chatus Dimen	val 🕅 OTHER:		П
OTHER: Request TA Status Renew	ed operations. (Clearly state all pertinent details, a	nd give pertinent dates, including estimated	date
	s. SEE RULE 19.15.7.14 NMAC. For Multiple C		uaic
proposed completion or recom		ompletions. Attach well-ore diagram of	
proposed compression or recom-	F		
	form a MIT on this well to renew the TA status.		top
perforation is at 5112'. The well will be	e pressured to 500 psi for 30 minutes with a press	· · · · · · · · · · · · · · · · · · ·	
	f	IPPROVE 6 Month extension	*
	<u>_</u>	on T/A-Sta	JUS
٠ ١ ٠ ٠ ٠	Condition of Approval: Notify OCD Ho	est & Chart will need to	٥
TAd 03-2002	office 24 hours prior to running MIT T	place well	on_
		Production	OR
NO PRODUCTION REPOR	• —	Plug dan	
IN OVER 121 MONTH		1 ~ 1	
		atterwards	
Spud Date:	Rig Release Date:		
Ja-	•		
I hereby certify that the information abo	ove is true and complete to the best of my knowled	lge and belief	
	1	.go aa ooo	
	$\mathcal{M}$		
SIGNATURE A SUBSTITUTE OF THE SIGNATURE	TITLE Vice President / Prod	uction Manager DATE January 24, 2012	
		·.	
	E-mail address: <u>dwilson@breckop.com</u> PHO	ONE: <u>(254) 559-3355</u>	•
For State Use Only	)		
APPROVED BY: Wash	with TITLE Compliance O	Ficer DATE 1-27-2013	2
Conditions of Approval (if any):	THE TOTAL OF THE CONTRACT OF T	DATE	
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