

HOBBS OCD

OIL CONSERVATION DIVISION

APR 10 2012

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-40361
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Quail "16" State
8. Well Number 3H
9. OGRID Number 151416
10. Pool name or Wildcat Lea; Bone Spring

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 ☐

2. Name of Operator
Fasken Oil and Ranch, Ltd.

3. Address of Operator
303 W. Wall, Suite 1800, Midland, TX 79701

4. Well Location BHL - Unit Letter D, 380' FNL and 380' FWL
Unit Letter M : 660' feet from the South line and 300' feet from the West line
Section 16 Township 20S Range 34E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3640' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 ☐

SUBSEQUENT REPORT OF:

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

OTHER: Change the name of the well ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Fasken Oil and Ranch, Ltd. proposes to change the well name of this well from the Quail State "16" Com No. 3H to the Quail "16" State No. 3H.

OPER. OGRID NO. 151416
PROPERTY NO. 36547
POOL CODE 37570
EFF. DATE 4-9-2012
API NO. 30-025-40361

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Kim Tyson TITLE Regulatory Analyst DATE 4-9-2012

Type or print name Kim Tyson
For State Use Only

E-mail address: kimt@forl.com

Telephone No. (432) 687-1777

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE APR 11 2012

Conditions of Approval (if any):

APR 11 2012