

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

Form C-103
Revised August 1, 2011

HOBBS OGD

RECEIVED
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
AUG 13 2012 Santa Fe, NM 87505

SUNDRY NOTICES OF INTENTION TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS		7. Lease Name or Unit Agreement Name Northeast Pearl Queen Unit
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> Injection Well <input type="checkbox"/>	2. Name of Operator Quantum Resources Management, LLC	8. Well Number 008
3. Address of Operator 1401 McKinney St., Suite 2400, Houston, TX 77010		9. OGRID Number 243874
4. Well Location Unit Letter <u>B</u> : <u>330</u> feet from the <u>North</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>23</u> Township <u>19S</u> Range <u>35E</u> NMPM County <u>Lea</u>		10. Pool name or Wildcat Pearl; Queen
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3793' RKB		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <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.

Per Underground Injection Control Program Manual

11.6 C Packer shall be set within or less than 100

feet of the uppermost injection perfs or open hole.

Quantum proposes to bleed pressure from casing & re-test packer & casing for 30 minutes. If well fails to test, will then MIRUPU & check tubing, packer, and casing for leaks, re-run packer and re-test well.

The Oil Conservation Division
MUST BE NOTIFIED 24 Hours
Prior to the beginning of operations

Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart

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 Celeste G. Dale TITLE Sr. Regulatory Analyst DATE 08/10/12

Type or print name Celeste G. Dale E-mail address: cdale@gracq.com PHONE: 432-683-1500
For State Use Only

APPROVED BY [Signature] TITLE Dist. Mgr. DATE 8-14-2012
Conditions of Approval (if any): AUG 15 2012