Office District I = (575) 393-6161 Energy, Minerals and N	Mexico Form C-103
<u>2-8.16(1)</u> (2/2) 0.55 0.01	latural Resources Reviséd August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283  HOBBS OCD ONGERNAL THE	WELL API NO. 30-025-38916
811 S First St, Artesia, NM 88210 OIE CONSERVATION	5. Indicate Type of Lease
District III - (505) 334-6178 1000 Rio Brazos Rd , Aztec, NM 87410 AUG 1 3 2012 Santa Fe, NM District IV - (505) 476-3460 Santa Fe, NM	rancis Dr. STATE FEE /
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WE	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-10 PROPOSALS)	FOR SUCH Cone Jalmat Yates Pool Unit
1. Type of Well: Oil Well Gas Well Other Injection	on Well 8. Well Number 127
2. Name of Operator Quantum Resources Management, LLC	9. OGRID Number 243874
3. Address of Operator	10. Pool name or Wildcat
1401 McKinney St., Suite 2400, Houston, TX 77010	Jalmat; Tan-Yates-7 Rvrs
4. Well Location	
	buth line and 2062 feet from the East line
Section 13 Township 228  11. Elevation (Show whether	Range 35E NMPM County Lea
3585' GR	DK, Ideb, KY, Oli, etc.)
12. Check Appropriate Box to Indicate	e Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐	REMEDIAL WORK
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐	COMMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING   MULTIPLE COMPL   DOWNHOLE COMMINGLE	CASING/CEMENT JOB Per Underground Injection Control Program Manual
	OTHER: 11.6 C Packer shall be set within or less than 100
OTHER:	OTHER: Land OTHER:
of starting any proposed work). SEE RULE 19.15.7.14 NN proposed completion or recompletion.	1AC. For Multiple Completions: Attach wellbore diagram of
Ouantum proposes to bleed pressure from casing & re-test	packer & casing to 500# 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	Condition of Approval- notify
The Oil Conservation Division MUST RE NOTIFIED 24 Hours	Condition of Approval: notify
MUST BE NOTIFIED 24 Hours	OCD Hobbs office 24 hours
	The state of the s
MUST BE NOTIFIED 24 Hours	OCD Hobbs office 24 hours
MUST BE NOTIFIED 24 Hours	OCD Hobbs office 24 hours
MUST BE NOTIFIED 24 Hours	OCD Hobbs office 24 hours prior of running MIT Test & Chart
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations	OCD Hobbs office 24 hours prior of running MIT Test & Chart
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations	OCD Hobbs office 24 hours prior of running MIT Test & Chart  Date:
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations  Spud Date: Rig Release  I hereby certify that the information above is true and complete to the	OCD Hobbs office 24 hours prior of running MIT Test & Chart  Date:
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations  Spud Date:  Rig Release  I hereby certify that the information above is true and complete to the	OCD Hobbs office 24 hours prior of running MIT Test & Chart  Date:
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations  Spud Date:  Rig Release  I hereby certify that the information above is true and complete to the SIGNATURE Little M. Date  TITLE Sr.	OCD Hobbs office 24 hours prior of running MIT Test & Chart  Date:  be best of my knowledge and belief.
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations  Spud Date:  Rig Release  I hereby certify that the information above is true and complete to the SIGNATURE Little M. Date  TITLE Sr.	OCD Hobbs office 24 hours prior of running MIT Test & Chart  Date:  e best of my knowledge and belief.  Regulatory Analyst  DATE 08/10/12
MUST BE NOTIFIED 24 Hours Prior to the beginning of operations  Spud Date:  Rig Release  I hereby certify that the information above is true and complete to the SIGNATURE  SIGNATURE  TITLE Sr.  Type or print name Celeste G. Dale  E-mail additional complete to the comple	OCD Hobbs office 24 hours prior of running MIT Test & Chart  Date:  e best of my knowledge and belief.  Regulatory Analyst  DATE 08/10/12