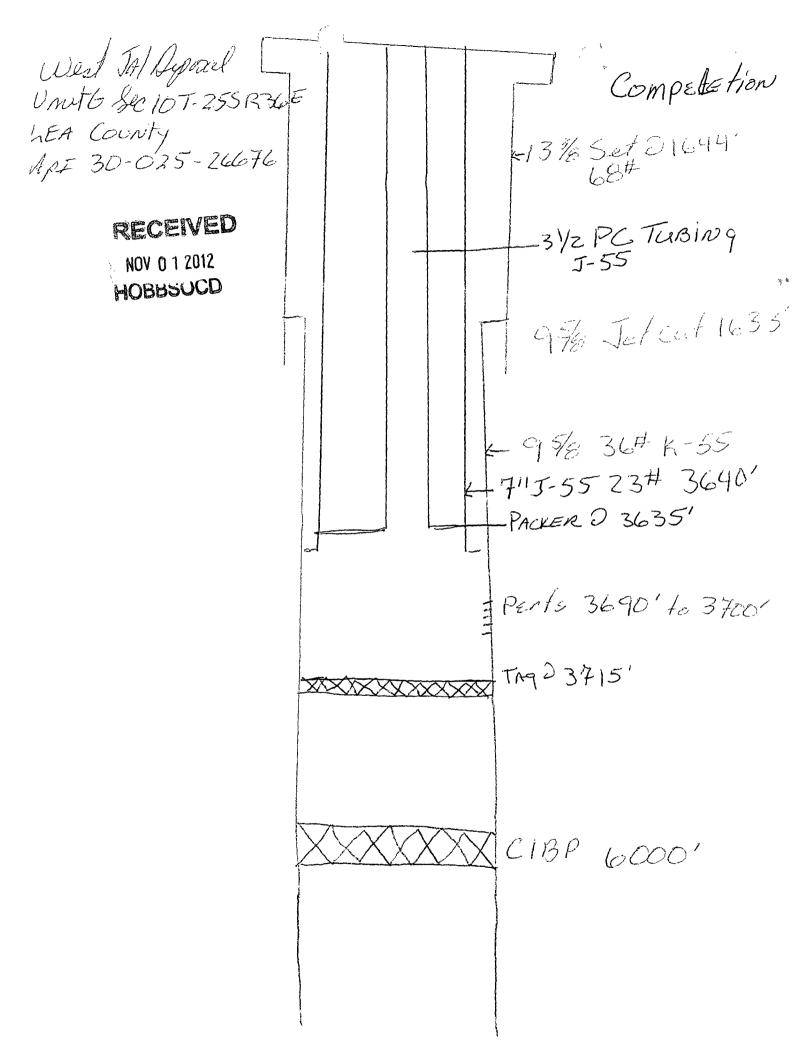
Submit 1 Copy To Appropriate District Office	State of New Mexico)	Form C-103	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural R	Resources	Revised August 1, 2011	
1625 N French Dr., Hobbs, NM 88240		WELL API NO.	5-26676	
District II – (575) 748-1283 811 S First St., Artesia, NM 88210		VISION 5. Indicate Type of		
District III - (\$05) 334-6178 South St. Francis Dr.		Dr. STATE	FEE K	
Comto Ec. XIM 07505		6. State Oil & Ga		
1220 S St Francis Dr, Santa Fe, NM NUV	0 1 2012			
8/303	ES AND REPORTS ON WELLS	7 Lagga Nama or	Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			Om Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			AL MISPOSAL	
PROPOSALS) 1. Type of Well: Oil Well Gas Well X Other		8. Well Number	,	
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator		9. OGRID Numbe	ar .	
MESQUITE SWD FNG		161968)	
3. Address of Operator		10. Pool name or	Wildcat	
			RIVERS SWO	
4. Well Location	, , , c , we come , we			
	990 feet from the \mathcal{N}	line and 1990 feet from	n the Eline	
Section 10		36E NMPM	County LEA	
	11. Elevation (Show whether DR, RKI			
12. Check A	ppropriate Box to Indicate Natur	e 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 DRILLING OPNS. P AND A				
PULL OR ALTER CASING	MULTIPLE COMPL CA	SING/CEMENT JOB		
DOWNHOLE COMMINGLE				
OTHER:	□ от	HER:		
13. Describe proposed or comple	eted operations. (Clearly state all pertir			
	k). SEE RULE 19.15.7.14 NMAC. Fo	or Multiple Completions: Attach w	rellbore diagram of	
proposed completion or reco	mpletion.	0.10.05		
12/2/12 10/11	MAD PRESURE ON	OBACK DIVE		
10/31/12 0011	The process	Box IIndonescund Injection Co.	inal Duagnam Manual	
Skiet WEII IN. Per Underground Injection Control Program Manual			ittoi Liogram Mannai	
11.6 C Packer shall be set within or less than 10			thin or less than 100	
Tracing Dr BACKER				
feet of the uppermost injection perfs or open hole.				
Illiliz MI XI9	*			
•				
		Condition of A	pproval: notify	
The Oil Conservation I	Division	•	OCD Hobbs office 24 hours	
MUŞT BE NOTIFIED 2	4 Hours			
		prior of running N	MIT Test & Chart	
Spud Parior to the beginning of	pperations Rig Release Date:	1	1	
•				
Lhereby certify that the information a	bove is true and complete to the best of	f my knowledge and halief		
a a		iny knowledge and benef.		
	ρ	·	1 /	
SIGNATURE / MM JUMA	TITLE / res	ident DA	TE 11/1//2	
	SON TITLE PLEA CLAYLWI E-mail address:	LSON SHOTMAIN COM	125 7N/ 10/h	
Type or print name	E-mail address:	РН	ONE. <u>373 - 706 / 8</u> 40	
For State Use Only				
APPROVED BY: The State Use Only APPROVED BY: DATE 11-1-2012				
Conditions of Approval (if any):	The Hill And	DA	ILI / CEST	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>,</i>			



36E

2.) During each day of operation for the Rig crew will inspect and closely monitor the fluids contained with the steel tanks and visually monitor any releases that may occur. Should a release, spill or leak occur, the VMOCD District 1 office Hobbs, 575-393-6161 will be notified, as required in NMOCD rule 19.15.29.8.

Closure:

After work over operations, fluids and solids will be hauled and disposed at CRI location permit number NM-01-0006. Secondary site will be Sundance Disposal permit number NM-01-0003.