

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 July 18, 2013

**RECEIVED**  
**CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
**SEP 30 2013**  
**HOBBSOCD**

WELL API NO. 30-025-30196
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9519
7. Lease Name or Unit Agreement Name WEST DOLLARHIDE QUEEN SAND UNIT
8. Well Number 108
9. OGRID Number 004115
10. Pool name or Wildcat DOLLARHIDE QUEEN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) KB = 3189'

**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  **INJECTOR**

2. Name of Operator  
**CHAPARRAL ENERGY, LLC.**

3. Address of Operator  
**701 CEDAR LAKE BLVD. OKC, OK 73114**

4. Well Location  
 Unit Letter **E** : **2310** feet from the **NORTH** line and **380** feet from the **WEST** line  
 Section **29** Township **24S** Range **38E** NMPM. **LEA** County **NM**

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>		<b>Per Underground Injection Control Program Manual</b>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>		<b>11.6 C Packer shall be set within or less than 100 feet of the uppermost injection perfs or open hole.</b>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, including pertinent data (both proposed and actual) of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIRU WORK OVER RIG. DETERMINE WHY WELL FAILED BRADENHEAD TEST. REPAIR AS NEEDED.

ALL FIELD OPERATIONS WILL BE CONDUCTED USING A CLOSED LOOP SYSTEM.

**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 Lindsay Reames TITLE ENGINEERING TECH II DATE 9.30.2013  
 Type or print name LINDSAY REAMES E-mail address: lindsay.reames@chaparralenergy.com  
**For State Use Only** PHONE: 405.426.4549

APPROVED BY: [Signature] TITLE Dist. Mgr DATE 9-30-2013  
 Conditions of Approval (if any):

SEP 30 2013 l