

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

**HOBBS OCD** State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised August 1, 2011

OCT 04 2013  
**RECEIVED**  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. <b>30-025-41448</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Nocaster 19 Federal</b>
8. Well Number <b>3H</b>
9. OGRID Number <b>270329</b>
10. Pool name or Wildcat <b>Bell Lake; Bone Spring</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3602.9 GR</b>

**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  
**Endurance Resources LLC**

3. Address of Operator  
**203 W Wall Suite 1000 Midland TX 79701**

4. Well Location  
 Unit Letter **O** ; **330** feet from the **south** line and **1980** feet from the **east** line  
 Section **19** Township **23S** Range **34E** NMPM **Lea** County **NM**

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   
 DOWNHOLE COMMINGLE

**SUBSEQUENT REPORT OF:**  
 REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  P AND A   
 CASING/CEMENT JOB

OTHER: Change Pool Designation  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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Request change of pool designation from Bell Lake; Bone Spring (5130) to Antelope Ridge; Bone Spring, West (2209) Pool ID.

OPER OGRID NO. 270329  
 PROPERTY NO. 40168  
 POOL CODE 2209  
 EFF. DATE 10/10/13  
 API NO. 30-025-41448

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 L. A. Sirgo III TITLE Engineer DATE 10-2-2013  
 Type or print name M. A. Sirgo, III E-mail address: manny@enduranceresourcesllc.com PHONE: 432/242-4680  
**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE OCT 11 2013  
 Conditions of Approval (if any):

OCT 15 2013