

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  
OCT 01 2013  
RECEIVED  
CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

|                                                                                                                                                                                                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| WELL API NO.<br>30-041-20756                                                                                                                                                                                         |  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input type="checkbox"/>                                                                                                                             |  |
| 6. State Oil & Gas Lease No.                                                                                                                                                                                         |  |
| 7. Lease Name or Unit Agreement Name<br>Horton Federal                                                                                                                                                               |  |
| 8. Well Number 32                                                                                                                                                                                                    |  |
| 9. OGRID Number<br>257420                                                                                                                                                                                            |  |
| 10. Pool name or Wildcat<br>Milnesand-San Andres                                                                                                                                                                     |  |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other WIW                                                                                                            |  |
| 2. Name of Operator<br>EOR Operating Company                                                                                                                                                                         |  |
| 3. Address of Operator<br>200 N. Loraine, STE 1440 Midland, TX 79701                                                                                                                                                 |  |
| 4. Well Location<br>Unit Letter <u>H</u> : <u>2305</u> feet from the <u>N</u> line and <u>285</u> feet from the <u>E</u> line<br>Section <u>30</u> Township <u>08S</u> Range <u>35E</u> NMPM County <u>Roosevelt</u> |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)                                                                                                                                                                   |  |

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 ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: MIT Testing ☒

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.

10/7/13 Contacted Donna Mull at OCD to give notice of bradenhead/MIT testing

10/9/13 Conducted bradenhead and MIT tests. See attached MIT chart and bradenhead test report.

Spud Date:

Rig Release Date:

Letter of Violation  
11/6/13  
SAS

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jana True TITLE Production/Regulatory Mgr DATE 10/31/13

Type or print name Jana True E-mail address: jtrue@enhancedoilres.com PHONE: 432-242-4544  
For State Use Only

APPROVED BY [Signature] TITLE DIST MGR DATE 11-4-2013  
Conditions of Approval (if any):

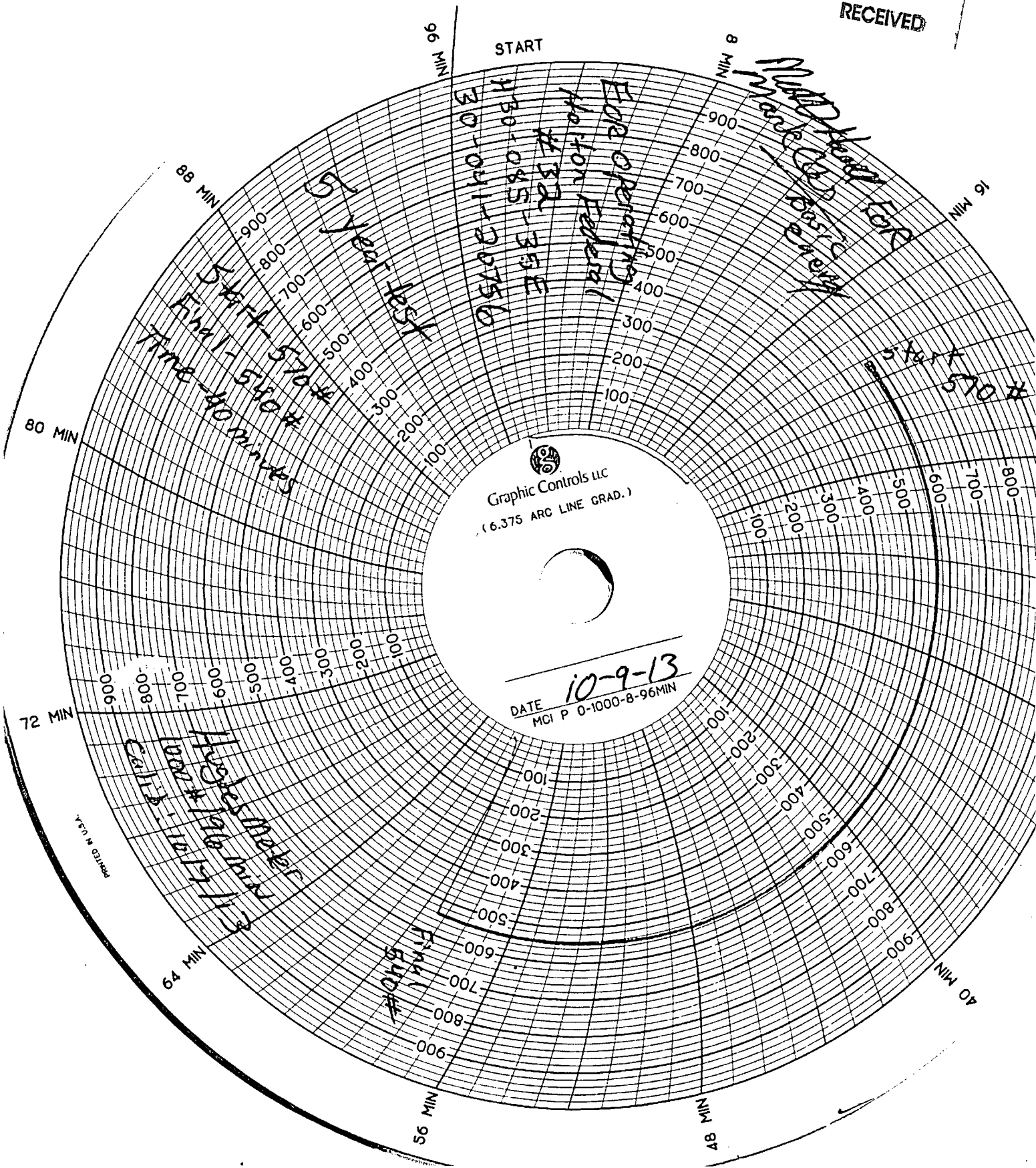
NOV 07 2013

O.SAS  
11/6/13

HOBBS OCD

OCT 31 2013

RECEIVED



CLAS 10/6/13

HOBBS OCD

OCT 31 2013

RECEIVED

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

|                                               |                                   |
|-----------------------------------------------|-----------------------------------|
| Operator Name<br><i>EOR Operating Company</i> | API Number<br><i>30-041-20756</i> |
| Property Name<br><i>Horton Federal</i>        | Well No.<br><i>32</i>             |

7. Surface Location

|                      |                      |                        |                     |                          |                      |                         |                      |                            |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|-------------------------|----------------------|----------------------------|
| UL - Lot<br><i>H</i> | Section<br><i>30</i> | Township<br><i>08S</i> | Range<br><i>35E</i> | Feet from<br><i>2305</i> | N/S Line<br><i>N</i> | Feet From<br><i>285</i> | E/W Line<br><i>E</i> | County<br><i>Roosevelt</i> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|-------------------------|----------------------|----------------------------|

Well Status

|             |                  |           |                        |
|-------------|------------------|-----------|------------------------|
| Well Status | SHUT-IN <i>✓</i> | PRODUCING | DATE<br><i>10-9-13</i> |
|-------------|------------------|-----------|------------------------|

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

|                      | (A) Surf-Interm | (B) Interm(1)-Interm(2) | (C) Interm-Prod | (D) Prod Casing | (E) Tubing |
|----------------------|-----------------|-------------------------|-----------------|-----------------|------------|
| Pressure             | <i>Ø</i>        | <i>Ø</i>                | <i>Ø</i>        | <i>Ø</i>        | <i>Ø</i>   |
| Flow Characteristics |                 |                         |                 |                 |            |
| Full                 | Y / N           | Y / N                   | Y / N           | Y / N           |            |
| Steady Flow          | Y / N           | Y / N                   | Y / N           | Y / N           |            |
| Surges               | Y / N           | Y / N                   | Y / N           | Y / N           |            |
| Down to nothing      | Y / N           | Y / N                   | Y / N           | Y / N           |            |
| Gas or Oil           | Y / N           | Y / N                   | Y / N           | Y / N           |            |
| Water                | Y / N           | Y / N                   | Y / N           | Y / N           |            |

If bradenhead flowed water, check all of the descriptions that apply:

|       |       |       |        |       |
|-------|-------|-------|--------|-------|
| CLEAR | FRESH | SALTY | SULFUR | BLACK |
|-------|-------|-------|--------|-------|

Remarks:

*(Shut IN)*

*"Letter of Violation" 11/6/13.*  
*Expired TA / Statute (Fed). LAD 11/5/2013*

|                                                 |                            |
|-------------------------------------------------|----------------------------|
| Signature: <i>Matt Howell</i>                   | OIL CONSERVATION DIVISION  |
| Printed name: <i>MATT HOWELL</i>                | Entered into RBDMS         |
| Title: <i>Assistant Foreman - EOR Operating</i> | Re-test                    |
| E-mail Address: <i>howellmatt100@yahoo.com</i>  |                            |
| Date: <i>10-9-13</i>                            | Phone: <i>575-607-5947</i> |
| Witness: <i>7</i>                               |                            |

*EC/OCD 11-4-2013*

# Hughes Meter & Supply Co., Inc.

1206 S. Slaughter, P.O. Box 951

Sundown, Texas 79371

Ph: 806/229-5811 Fax: 806/229-200

## CALIBRATION DATA

DATE 10-7-13

TYPE METER 1000#

### DEADWEIGHT TESTER

### METER BEFORE CALIBRATION

### METER AFTER CALIBRATION

100 P.S.I.

90 P.S.I.

100 P.S.I.

250 P.S.I.

245 P.S.I.

250 P.S.I.

500 P.S.I.

500 P.S.I.

500 P.S.I.

800 P.S.I.

800 P.S.I.

800 P.S.I.

900 P.S.I.

900 P.S.I.

900 P.S.I.

1000 P.S.I.

1000 P.S.I.

1000 P.S.I.

REMARKS:

SIGNED

Tech Sai