

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

HOBBS OCD
JAN 22 2014
RECEIVED

State of New Mexico
 Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 June 19, 2008

WELL API NO. <i>30-025-20980</i>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <i>E-7723</i>
7. Lease Name or Unit Agreement Name <i>STATE AF</i>
8. Well Number <i>3</i>
9. OGRID Number <i>222759</i>
10. Pool name or Wildcat <i>WOLF CAMP SWD</i>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 *SALT WATER DISPOSAL*

2. Name of Operator
Buckeye DISPOSAL LLC

3. Address of Operator
PO Box 2724 Lubbock Texas 79408

4. Well Location
 Unit Letter *L* : *1980* feet from the *South* line and *990* feet from the *West* line
 Section *8* Township *18S* Range *35E* NMPM County *Lea*

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

*1-23-14 Rig up polling Unit
 pull pipe out of hole
 Run packer in well
 Isolate hole*

Per Underground Injection Control Program Manual
11.6 C Packer shall be set within or less than 100 feet of the uppermost injection perfs or open hole.

**Condition of Approval: notify
 OCD Hobbs office 24 hours
 prior of running MIT Test & Chart**

**PROVIDE CURRENT WELLBORE DIAGRAM
 WITH SUBSEQUENT C-103**

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 *J.D. Sayre* TITLE *MANAGER* DATE _____

Type or print name *JIM SAYRE* E-mail address: *jsay@the-starbuckenergy.com* PHONE: *390-6006*

APPROVED BY: *Maley Brown* TITLE *Compliance Officer* DATE *1/23/2014*
 Conditions of Approval (if any): _____

JAN 23 2014