

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 87001
 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

HOBBS OCD

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

JAN 23 2014

RECEIVED

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.)		WELL API NO. 30-025-27641
1. Type of Well: X Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Sundown Energy LP		6. State Oil & Gas Lease No. 309115
3. Address of Operator 13455 Noel Rd Suite 2000 Dallas, TX 752440		7. Lease Name or Unit Agreement Name BOBBI 3 RVRS
4. Well Location Unit Letter <u>E</u> <u>2310</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>West</u> line Section <u>20</u> Township <u>18 S</u> Range <u>36 E</u> NMPM County: <u>LEA</u>		8. Well Number: #005
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3835' GL 3847' KB		9. OGRID Number 232611
		10. Pool name or Wildcat: Arkansas Junction; San Andres, West

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- DOWNHOLE COMMINGLE
- CLOSED-LOOP SYSTEM
- OTHER: OTHER: Change Name of Well from: BOBBI 3 RVRS #005
 Change Name of Well to: BOBBI STATE WATERFLOOD UNIT #5

SUBSEQUENT REPORT OF:

- REMEDIAL WORK
- COMMENCE DRILLING OPNS.
- CASING/CEMENT JOB
- ALTERING CASING
- P AND A

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.

**CHANGE NAME OF WELL FROM: BOBBI 3 RVRS #005
 CHANGE NAME OF WELL TO: BOBBI STATE WATERFLOOD UNIT #5
 State WF

OPER. OGRID NO. 232611
 PROPERTY NO. 40359
 POOL CODE 2503
 EFF. DATE 08/13/2013
 API NO. 30-025-27641

R-13731

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 Shaunda Wheeler TITLE Production Supervisor DATE 01/21/2014
 Type or print name Shaunda Wheeler E-mail address: swheeler@elandenergy.com PHONE: 214-368-6100
 For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE JAN 28 2014
 Conditions of Approval (if any):

JAN 28 2014