Submit I Copy To Appropriate District	State of New Mexi-	со	Form C-103	
Office <u>District 1</u> – (575) 393-6161	nergy, Minerals and Natural	Resources	Revised July 18, 2013	
1625 N. French 7.49 1323	OGD .	WELL A		
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION D		25-30210 /	
<u>District III</u> – (505) 334-6178 <b>MAR 1 0</b>	<b>2014</b> 220 South St. Franci		te Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 8750	\c	Oil & Gas Lease No.	
1220 S. St. Francis Dr. Santa Fe. NM	,	0. 2		
87505 RECEN			3-9613	
SUNDRY NOTICES A (DO NOT USE THIS FORM FOR PROPOSALS TO	ND REPORTS ON WELLS		Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION		arion.	OLLARHIDE QUEEN SAND UNIT	
PROPOSALS.)		WEST D	Translation 1	
1. Type of Well: Oil Well Gas W	Tell Other INJECTION	Y	109	
2. Name of Operator		9. OGRI	D Number	
CHAPARRAL ENERGY, LLC.  3. Address of Operator		10 Pool	name or Wildcat	
701 CEDAR LAKE BLVD. OKC, OK 73114				
4. Well Location	E BLVD. OKC, OK /3114	·   DOL	LARHIDE QUEEN	
	) care di NODTIL	1'1 <i>EEO</i>	S. A. S. A. MEGT.	
Unit Letter D : 750 feet from the NORTH line and 550 feet from the WEST line				
Section 32 Township 24S Range 38 NMPM LEA County				
11. E	Elevation (Show whether DR, R	KB, RT, GR, etc.)	A Company	
The State of the S	3164' GR			
12 Charle Annua	onicas Dec de Yordicada Nicas		Odka Data	
12. Check Approj	priate Box to Indicate Natu	ire of Notice, Report of	Other Data	
NOTICE OF INTEN	TION TO:	SUBSEQUE	NT REPORT OF:	
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WOR				
		OMMENCE DRILLING OPI	<del>-</del>	
<del></del>		ASING/CEMENT JOB		
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM	İ	· · · · · · · · ·		
OTHER:		THER:		
13. Describe proposed or completed o				
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of				
proposed completion or recompletion.				
WELL HAD TBG. LEAK				
1. PREPARE WELL LOCATION. NOTIFY HOBBS DISTRICT OFFICE.				
2. RIG UP DDPU. TOOH W/INJECTION TBG & PACKER.				
3. CHECK FOR FILL IN WELL. CLEAN OUT IF NECESSARY.				
4. TIH W/PACKER & INJECTION TBG REPAIRED AS NEEDED. SET PACKER WITHIN 100' OF TOP PERF				
5. DISPLACE ANNULUS W/PACKER FLUID.				
6. TEST ANNULUS AS NEEDED. NOTIFY HOBBS DISTRICT OFFICE TO WITNESS.				
7. PLACE WELL ON INJECTION	N. RDMO DDPU. SUBMI	T REPORT.		
<del></del>				
Spud Date:	Rig Release Date:			
Spud Date.	Tig Release Date.			
I hereby certify that the information above i	s true and complete to the hest	of my knowledge and heliet	9	
Thereby certify that the information above	s true and complete to the ocsi.	of my knowledge and belief		
$\mathcal{L}$	- <b>\</b>		·.	
SIGNATURE THAT HE	2000 <del>T</del> ITLE ENG	INEERING TECH II	DATE 3.5.2014	
	lindsay.reames	@chaparralenergy.cor		
Type or print name LINDSAY REAMES	E-mail address:		PHONE: 405.426.4549	
For State Use Only	Λ	1.5	1 /	
ADDROVED BY YVIAIOUM SUCH SUCH SURVEY				
APPROVED BY: 1 CHILD STATE STATE DATE STATE STAT				
CONDITION OF APPROVAL: Operator shall give	e the OCD	OO	2271	
District Office 24 hour notice before running the M	AIT test and chart.		MAR 1 3 2014	
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