

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 87422
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 August 1, 2011

HOBBS OGD
MAR 20 2014
RECEIVED

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

<p align="center">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-104) FOR SUCH PROPOSALS.)</p>		WELL API NO. 30-025-26307
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Brine Well</u>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <u>PAB SERVICES DBA SALT9 Day Inc.</u>		6. State Oil & Gas Lease No. 25087
3. Address of Operator <u>PO Box 190 Lubbock TX 79408</u>		7. Lease Name or Unit Agreement Name <u>Brine Supply Well</u>
4. Well Location Unit Letter <u>J</u> : <u>1980</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>5</u> Township <u>19S</u> Range <u>36E</u> NMPM County		8. Well Number <u>601</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3963</u>		9. OGRID Number <u>184208</u>
10. Pool name or Wildcat <u>BSW + SALADO</u>		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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 checked="" type="checkbox"/>		OTHER: <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Rigged up pulling unit & dropped sinker rod found ^{SALT} plug at 263 Ft pump down tubing with pump truck to melt SALT Riggy Rig down pulling unit put back in operation

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

MIRU7

3-19-14

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

SIGNATURE

J.D. Sawyer

TITLE

MANAGER

DATE

3-19-14

Type or print name

JIM SAYRE

E-mail address:

JIM@thestandardenergy.com

PHONE:

575-390-6006

For State Use Only

APPROVED BY:

Neal White

TITLE

Compliance Officer

DATE

03/21/2014

Conditions of Approval (if any):

MAR 24 2014