Submit 1 Copy To Appropriate District Office	State of New Me	exico	Form C-103
<u>District 1</u> – (575) 393-6161	Energy, Minerals and Natu	ral Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	./		30-025-35297
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION 1220 South St. Frai		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 8		STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Salita Pe, Nivi 8	7505	6. State Oil & Gas Lease No. B-9385
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name			
(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 New Mexico "AN" State			
PROPOSALS.)	ROPOSALS.) HOBBS OCD 18, Well Number 10		
72 Name of Operator 9 OGRID Number 4			
2. Name of Operator CrownQuest Operating, LLC MAR 27 2014 9. OGRID Number 213190			
3. Address of Operator	TV 70710		10. Pool name or Wildcat
500 W. Texas Ave., STE 500 Midland,	1 X 79710 	RECEIVED	Saunders Permo Upper Penn
4. Well Location			
Unit Letter F : 1980 feet from the North line and 1980 feet from the West line Section 22 Township 14S Range 33E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTER	NTION TO:	9119	SECUENT DEDORT OF:
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
	CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐		
	MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE  CLOSED-LOOP SYSTEM			
OTHER:		OTHER: TA	A Status request test
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.			
proposed completion of recompl	etion.		
Procedure: - 7  1. Rigged up pump truck.			
2. Requested csg pressure test. See attached. CIBP @ 8950'. PT 520#. Time held: 30 min. Held OK.			
· · · · · · · · · · · · · · · · · · ·			
This Approval of Temporary 3/26/2015 Abandonment Expires			
Abandonment Expires			
Spud Date:	Rig Release Da	ate:	· ·
			I
I housely contify that the information char	a is two and somelets to the h	agt of man limounlands	a and ballac
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE lease manager DATE 3/27/2014			
Type or print name Brandon Willis E-mail address: b.willis@crownquest.comPHONE: 432-528-9830			
For State Use Only			
APPROVED BY: Malerel Stown TITLE Compliance Clice DATE 3/27/2014			
Conditions of Approval (if any):			
** ** ** ** ** ** ** ** ** * * * * * * *	TITLE O	nquance	DATE 9/27/2019

