

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 87410  
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

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

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-025-41483                                                                        |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br>W T McComack                                                |
| 8. Well Number #28                                                                                  |
| 9. OGRID Number<br>305165                                                                           |
| 10. Pool name or Wildcat                                                                            |

|                                                                                                                                                                                                        |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>                                                                         |  |
| 2. Name of Operator<br>Brammer Engineering, Inc.                                                                                                                                                       |  |
| 3. Address of Operator<br>400 Texas Street Suite 600, Shreveport, LA 71101                                                                                                                             |  |
| 4. Well Location<br>Unit Letter J : 1330 feet from the South line and 2310 feet from the East line<br>Section 32 Township 21S Range 37E NMPM County LEA                                                |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3470 GR                                                                                                                                          |  |

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 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: SPUD <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.

HOBBS OCD

APR 21 2014

RECEIVED

Spud Date:

04/18/2014

Rig Release Date:

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

SIGNATURE Amanda Johnson TITLE Co. Admin, Regulatory Department DATE 04/21/2014

Type or print name Amanda Johnson E-mail address: amanda.johnson@brammer.com PHONE: 318-429-2281

**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 04/21/14  
Conditions of Approval (if any):

APR 21 2014

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