Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.
<u>District II</u> – (575) 748-1283	OH CONGERNATION DIVISION		30-025-04026
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE
<u>District IV</u> - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, N	M 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATED 1. Type of Well: Oil Well X		FOR SUCH PROPOSALS.)	Northwest Eumont Unit
		HOBBS OCD	8. Well Number 127
2. Name of Operator Rhombus Operating Co. LTD		MAY 07 2014	OGRID Number 19111
3. Address of Operator		3313 33	10. Pool name or Wildcat
PO Box 8316, Midland TX 79708			Eumont Yates 7 Rivers Queen
4. Well Location		RECEIVED	
Unit Letter J: 1780	feet from the _South	line and _1650fe	eet from the Eastline
Section 22	Township 198	Range 36E	NMPM County Lea
	11. Elevation (Show whether	DR, RKB, RT, GR, etc.)	
3752 RKB			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐		
TEMPORARILY ABANDON X	<del>-</del>		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM  OTHER:		QTHER: TA Exter	nsion
	(0)		
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of startin any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
5/6/14 9:00 AM			
MIRU M&S Service Pump Truck & Chart Recorder. Pressure casing to 570 #. Pressure held for 35 min.			
RDMO Pump Truck.			
Submit test to OCD for TA Extension.			
This Approval of Temporary , I -			
This Approval of Temporary 4/2015  Abandonment Expires 5/4/2015			
		- 100 001 100 0	
	<u> </u>		
Spud Date:	Rig Release	Date:	
<del> </del>		<del> </del>	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certify that the information above is true and complete to the best of my knowledge and benefit.			
SIGNATURE Longe Benkam TITLE Prod. Foreman DATE 5/6/2014			
Type or print nameGeorge Benham E-mail address: _geoben70@gmail.com PHONE: 806-215-8363			
For State Use Only			
APPROVED BY: Maly Joseph TITLE Dist. Supervisor DATE 5/8/2014  Conditions of Approval (it any)			
Conditions of Approval (if any)			
V			

MAY 08 2014

