

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 July 18, 2013

HOBBS OCD
 JUN 19 2014

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

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-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-31443
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		5. Indicate Type of Lease FEDERAL STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator TLT SWD, LLC		6. State Oil & Gas Lease No. FED NM 86710
3. Address of Operator P.O. Box 1906, Hobbs, NM 88241		7. Lease Name or Unit Agreement Name LOST TANK SWD
4. Well Location Unit Letter <u>E</u> : 1980 feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line		8. Well Number 1
Section 31	Township 21-S	Range 32-E
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3648' GR		9. OGRID Number 287481
10. Pool name or Wildcat Delaware - SWD		10. Pool name or Wildcat Delaware - SWD

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

JUNE 13-JUNE 17, 2014

OPERATOR NOTICED THE TUBING/CASING HAD EQUALIZED. RU PULLING UNIT. PULLED NC PACKER AND TUBING. FOUND HOLE IN PKR MANDRELL. TESTED PC TUBING TO 7000#. NO BAE JOINTS FOUND. SET NEW PACKER AT 5241'. TOP PERF AT 5296'. LOADED ANNULUS WITH PACKER FLUID AND TESTED ANNULUS TO 480#. HELD GOOD. CHART GOOD. NOTIFIED MR. MAXEY BROWN OF NMOCD-HOBBS. RELEASED RIG. ORIGINAL CHART ATTACHED. JOB COMPLETED 06/17/2014.

Spud Date:

Rig Release Date:

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

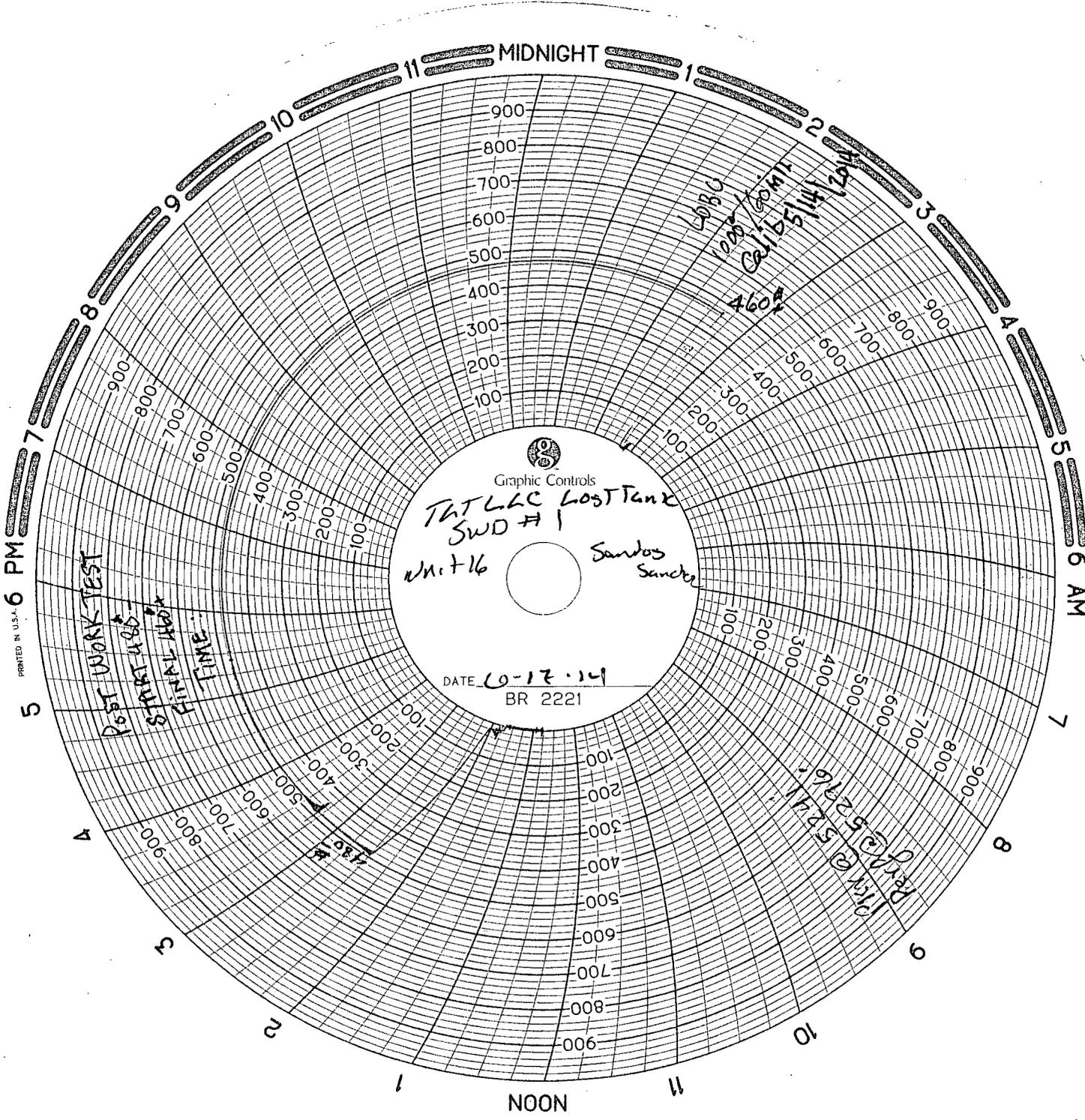
SIGNATURE [Signature] TITLE Agent DATE 06/19/2014

Type or print name M.Y. Merchant E-mail address: mymerch@penrocoil.com PHONE: 575-492-1236

For State Use Only

APPROVED BY: [Signature] TITLE Dist. Supervisor DATE 6/23/2014
 Conditions of Approval (if any):

JUN



Handwritten mark resembling a stylized 'L' or '7'.