

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 87400
 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 OGD OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

JUN 23 2014

WELL API NO. 30-025-03858
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1553
7. Lease Name or Unit Agreement Name State E Tract
8. Well Number 22
9. OGRID Number 270801
10. Pool name or Wildcat ABO-SWD
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

SUNDRY RECORDS 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.)

1. Type of Well: Oil Well Gas Well Other SWD

2. Name of Operator Rocky Smith SWD Systems, Inc.

3. Address of Operator 1515 Wazee Street, Suite 350 Denver CO 80202

4. Well Location
 Unit Letter G : 1650 feet from the N line and 1650 feet from the E line
 Section 2 Township 17S Range 36E NMPM LEA County

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: Final P&A Inspection <input checked="" type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>			

12-9-13

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.

This location is ready for final inspection and release from bonding obligations.

E-PERMITTING
 P&A NR _____ P&A R P.M.
 INT to P&A _____
 CSNG _____ CHG Loc _____
 TA _____

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 Scotty A. Smith TITLE President DATE 6/19/2014
 Type or print name Scotty A. Smith E-mail address: scotty@3forksres.com PHONE: 303.318.0717
For State Use Only
 APPROVED BY: Mark Whitaker TITLE Compliance Officer DATE 07/01/2014
 Conditions of Approval (if any):

JUL 02 2014