

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. 30-025-23089
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 23547
7. Lease Name or Unit Agreement Name Maxwell
8. Well Number 2
9. OGRID Number 012627
10. Pool name or Wildcat Sub , Devonian - Rean - Miss - Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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.)

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

2. Name of Operator
Kevin O. Butler & Associates, Inc.

3. Address of Operator
PO Box 1171 Midland, TX 79701

4. Well Location
 Unit Letter E : 2310 feet from the North line and 990 feet from the West line
 Section 6 Township 13S Range 38E NMPM County LEA

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"/> 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.

April 28-May 14, 2014
 Intent was to clean out the partially covered up Wolfcamp perfs as determined by slick line previously.
 1. RU WS Unit. Install BOP. TOH with packer and PC tubing.
 2. PU work string w/ bit and DC. Tagged at 9615' (Perfs: 9624-9682').
 3. Cleaned out to 9644'. After several days of attempts to clean out below 9644'.
 4. Acidize WC perfs with 3000 gallons 20% NEFE acid at 5 bpm.
 5. POH and LD packer and work string.
 6. PU PC packer and PC tubing. Ran same. Circulated packer fluid. Set packer at 9648'.
 7. Tested annulus to 550# for 32 minutes. Test witnessed and chart taken by Bill Sonnamaker.
 8. Returned well to SWD. RD and clean location.

Spud Date:

Rig Release Date:

BB OCS 7/8/2014

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

SIGNATURE Lisa Builta TITLE Regulatory Compliance DATE 6/9/14

Type or print name Lisa Builta E-mail address: Reports@kobutler.com PHONE: 432-682-1178

For State Use Only

APPROVED BY: Bill Sonnamaker TITLE Staff Manager DATE 7/8/2014

Conditions of Approval (if any):

JUL 09 2014

[Handwritten signature]

PRINTED IN U.S.A.

MIDNIGHT
FOR RECORD ONLY



Graphic Controls

Kevin O'Brien
Maxwell #2
AP I 30-025-23089-0000

UNIT F Secl, T135R38E
DATE 5-14-14
BR 2221

Start 040#
Final 040#
2 men
Bill Swenson
DOD David O'Leary

ACD
1000#
60 min
Cal 4/2/14

Jim [Signature]

NOON

