

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

**HOBBS OCD**  
**OIL CONSERVATION DIVISION**  
 1220 S. St. Francis Dr.  
 Santa Fe, NM 87505

JUL 14 2014

RECEIVED

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. 30-025-41230 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator MURCHISON OIL & GAS, INC.		6. State Oil & Gas Lease No.
3. Address of Operator 1100 MIRA VISTA BLVD., PLANO, TX 75093		7. Lease Name or Unit Agreement Name JACKSON UNIT ✓
4. Well Location Unit Letter <u>O</u> : <u>200</u> feet from the <u>S</u> line and <u>1430</u> feet from the <u>E</u> line Section <u>22</u> Township <u>24S</u> Range <u>33E</u> NMPM LEA County		8. Well Number 025H ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3543' GR		9. OGRID Number 15363
10. Pool name or Wildcat TRIPLE X; BONE SPRING, WEST		

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

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input 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"/>		OTHER: PERFORATIONS <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.

06/26 - 30/14: Frac w/Baker 16 stage system from 11,390'-15,800'; used 3,988,073 lbs sand, 77,670 bbls treated water & 953 bbls acid.  
 07/02 - 03/14: Milled out ports & circ hole clean. Started flowing well back at 7 AM; turned well over to production.

Spud Date: 05/15/2014 Rig Release Date: 06/18/2014

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

SIGNATURE Michael S. Daugherty TITLE EVP & COO DATE 07/07/2014

Type or print name Michael S. Daugherty E-mail/address: mdaugherty@jdmii.com PHONE: 972-931-0700

**For State Use Only**

APPROVED BY: [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

JUL 15 2014