

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

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

WELL API NO. 30/42-025-40942 ✓

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
 Quail "16" State Com ✓

8. Well Number 7H ✓

9. OGRID Number 151416 ✓

10. Pool name or Wildcat Lea; Bone Spring, South

4. Well Location BHL: A 330' North 330' East
 Unit Letter P : 200' feet from the South line and 225' feet from the East line
 Section 16 Township 20S Range 34E NMPM County Lea ✓

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3642' GR

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

2. Name of Operator Fasken Oil and Ranch, Ltd. ✓

3. Address of Operator 6101 Holiday Hill Road, Midland, TX 79707

RECEIVED
 AUG 01 2014
 HOBS OCD

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"/>		SUBSEQUENT REPORT OF: 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: Run Tubing in Well <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6-10-2014 – 6-12-2014

MIRU. Run 244 jts of 2-7/8" tubing @ 11,193' and one 5-1/2" Arrowset packer @ 10,694'. Released all rental equipment. RDPU and cleaned location.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Kim Tyson TITLE Regulatory Analyst DATE 7-29-2014

Type or print name Kim Tyson E-mail address: kimt@forl.com Telephone No. (432) 687-1777

For State Use Only

APPROVED BY: Maley Brown TITLE Dist. Supervisor DATE 8/4/2014
 Conditions of Approval (if any):

AUG 04 2014

for