

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

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

HOBBS OCD
 AUG 08 2014
 RECEIVED

WELL API NO. 30-025-22340
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 002404
7. Lease Name or Unit Agreement Name E. B. Anderson
8. Well Number 1
9. OGRID Number 12627
10. Pool name or Wildcat Bronco West Devonian <i>Atoka</i>
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

2. Name of Operator
 Kevin O Butler & Associates

3. Address of Operator
 P.O. Box 1171, Midland, TX 79702

4. Well Location
 Unit Letter L : 990 feet from the West line and 2310 feet from the South 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:		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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <u>Recomplete in Atoka zone</u> <input checked="" type="checkbox"/>		OTHER: <input 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.

1. Test anchors/replace and rig up Joe's Well Service
2. Tally & PU 4 3/4" bit, csg scrapper and 2 7/8" L-80 tubing.
3. TIH to 12,150'. TOH and stand 2 7/8" in the derrick.
4. Rig up wireline truck. Set CIBP @ 12,100'
5. Perforate 2 spf Atoka: 11,198' - 11,218'
6. TIH w/ pkr and 2 7/8" tbg. Spot 35' cement on top of CIBP.
7. Set pkr above Atoka (11,198-11,218') and swab test.
8. Based on swab test, acidize w/ 3000 gallons 15% NEFE, AIR 2-4 bmp and ball sealers.
9. Swab test for commercial production. Return to production, if commercial.

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 08/08/2014

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

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 08/11/14

Conditions of Approval (if any):

AUG 11 2014