

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

WELL API NO. 30-025-21336
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-9141
7. Lease Name or Unit Agreement Name GRM Unit
8. Well Number: GR#1
9. OGRID Number 234255
10. Pool name or Wildcat Gramma Ridge, Morrow
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3630 GR

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR RETURN BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

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

2. Name of Operator  
Enstor Grama Ridge Storage and Transportation, LLC

3. Address of Operator  
203929 State Highway 249, Suite 400, Houston, TX 77070

4. Well Location  
 Unit Letter E: 1980' feet from the North line and 660' feet from the West line  
 Section 3 Township 22S Range 34E NMPM County: Lea

HOBBBS  
 AUG 11 2014  
 RECEIVED

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: <input type="checkbox"/>		OTHER: <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.

Casing Test (MIT) on 7-11-2014  
 See attached.

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 DIRECTOR, LAND & REGULATORY DATE 8/8/14

Type or print name NICK NICODEMUS E-mail address: nick.nicodemus@enstorinc.com PHONE: 281-374-3089

APPROVED BY: [Signature] TITLE Staff Manager DATE 8/17/2014

Conditions of Approval (if any):

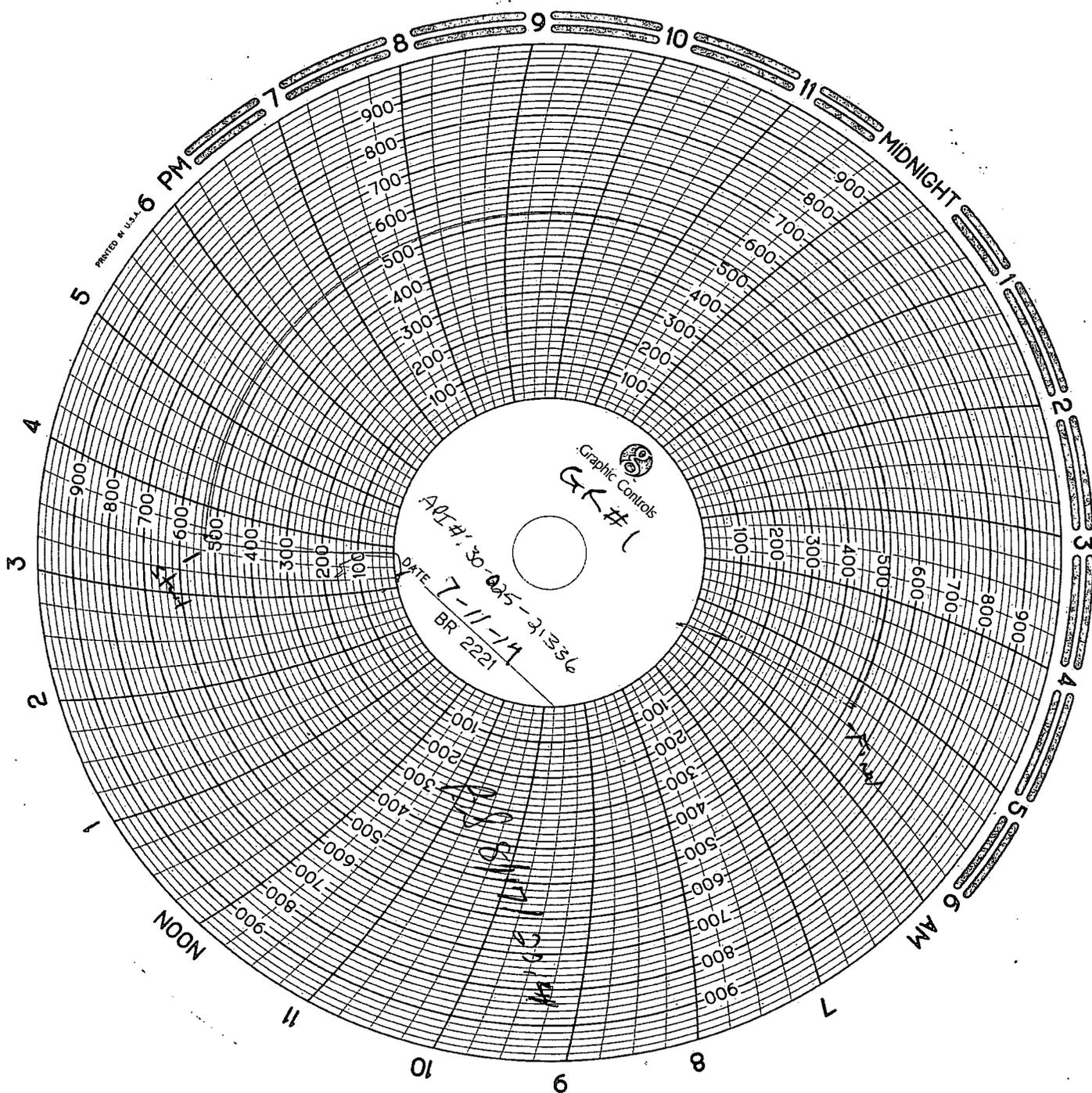
FOR RECORD ONLY

AUG 21 2014

[Handwritten initials]

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FOR RECORD ONLY



PRINTED IN U.S.A.

Paul Shoggy Pate 119  
7-11-14 GR #1

  
7-11-14 LFS

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