

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

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-103) FOR PROPOSALS.)		WELL API NO. 30-025-07934
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Great Western Drilling Company		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 1659 Midland, Texas 79702		7. Lease Name or Unit Agreement Name South Carter San Andres Unit
4. Well Location Unit Letter <u>D</u> : 330 feet from the <u>N</u> line and <u>990</u> feet from the <u>W</u> line Section <u>8</u> Township <u>18S</u> Range <u>39E</u> NMPM County <u>Lea</u>		8. Well Number <u>303</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL 3631'		9. OGRID Number 009338
		10. Pool name or Wildcat South Carter (San Andres)

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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <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: MP/MB TEST W/ CHART <input checked="" 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.

8/28/2014: TEST CASING TO 520 PSI FOR 30 MINUTES. VERBAL OK TO CONDUCT TEST BY BILL SONNAMAKER (OCD). ORIGINAL CHART IS ATTACHED W/ BRADENHEAD TEST REPORT. WELL IS AN INJECTION WELL.

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 Ralph Skinner Jr. TITLE PRODUCTION FOREMAN DATE 9-8-2014

Type or print name Ralph Skinner Jr. E-mail address: rskinner@gwdc.com PHONE: 575-942-1294

For State Use Only

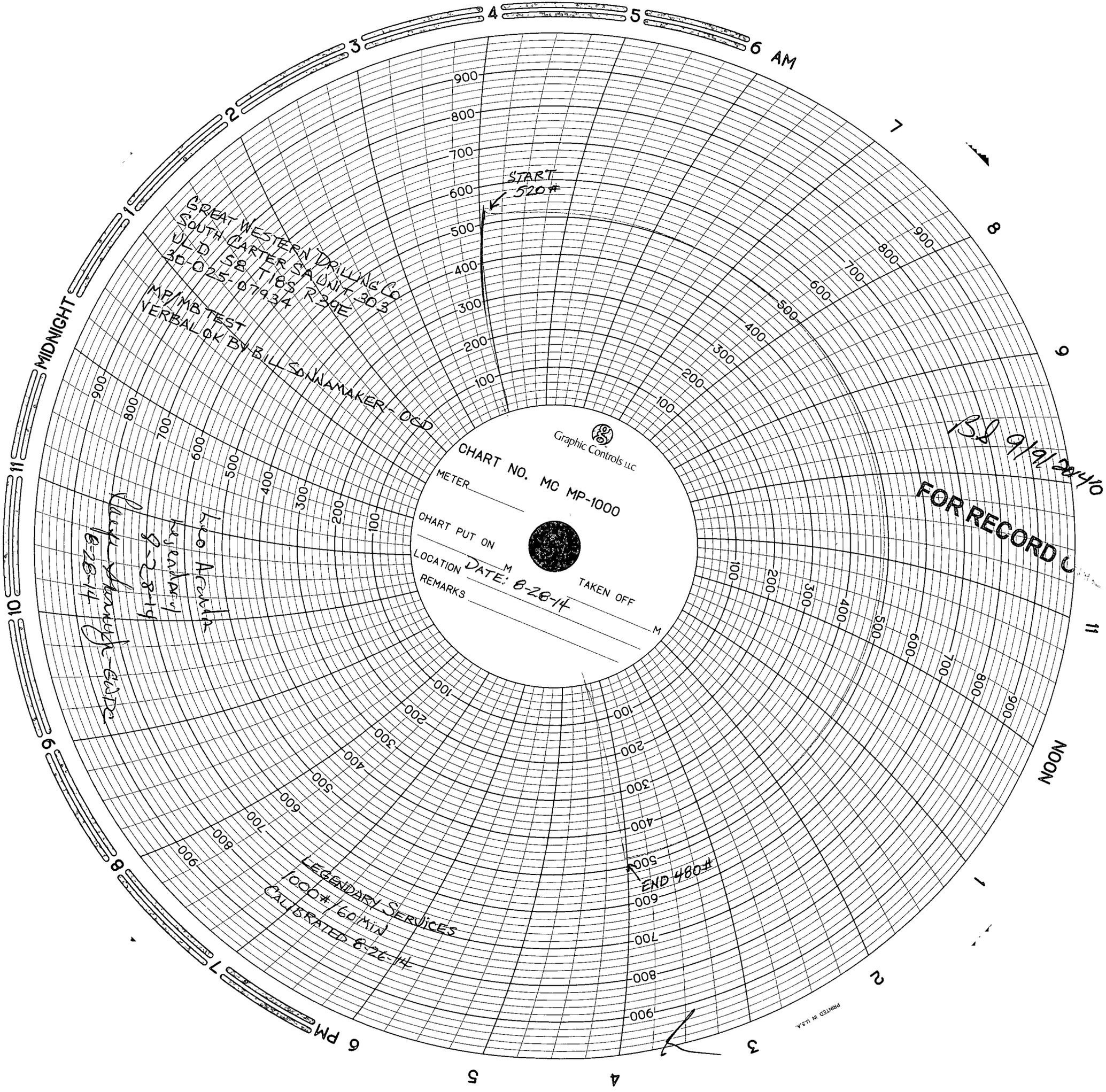
APPROVED BY: Bill Sonnamaker TITLE Staff Manager DATE 9/9/2014

Conditions of Approval (if any):

SEP 12 2014

FOR RECORD ONE

[Handwritten initials]



GREAT WESTERN DRILLING CO.
 SOUTH CARTER SA UNIT 303
 58 TIBS R 39E
 35-025-07934

MP/MB TEST
 VERBAL OK BY BILL SONNAMAHER - OGD

Graphic Controls, Inc.
 CHART NO. MC MP-1000
 METER _____
 CHART PUT ON _____
 LOCATION DATE: 8-28-14
 REMARKS _____
 TAKEN OFF _____

Leo Arcadia
 Legendary
 8-28-14
 Bill Sonnamaher - OGD
 8-28-14

LEGENDARY SERVICES
 1000# / 60 MIN
 CALIBRATED 8-26-14

BS 9/19/2010
 FOR RECORD C

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