

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. 30-025-41186
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VO-6987
7. Lease Name or Unit Agreement Name RAPTOR WEST 3 STATE
8. Well Number 2H
9. OGRID Number 155615
10. Pool name or Wildcat SCHARB; BONE SPRING

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO 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
NADEL AND GUSSMAN PERMIAN, L.L.C.

3. Address of Operator
601 N. MARIENFELD, SUITE 508, MIDLAND, TX 79701

4. Well Location
Unit Letter P : 330 feet from the SOUTH line and 950 feet from the EAST line
Section 3 Township 19S Range 34E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3990' GL

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: <input type="checkbox"/>		OTHER: COMPLETION <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.

7/21/2014 – TEST CASING TO 1500 PSI. HELD OK. INCREASE PRESSURE TO 6,100 PSI SURFACE PRESSURE TO OPEN HALLIBURTON RSI TOOL @ 14,363'. PRESSURE AFTER OPENING TOOL 4,200 PSI.

7/30/2014 TO 8/1/2014 – FRAC WELL AND CLEAN OUT W/ COIL TUBING TO 14, 184'

8/7/2014 – COMMENCED FLOWBACK. WELL ON PRDUCTION.

Spud Date: 4/28/2014

Rig Release Date: 6/5/2014

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

SIGNATURE Sarah Presley TITLE REGULATORY ANALYST DATE 8/14/2014
Type or print name SARAH PRESLEY E-mail address: spreslsey@naguss.com PHONE: (432) 682-4429
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 09/23/14
Conditions of Approval (if any):

SEP 23 2014