

OCT 15 2014

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

Form C-10
Revised July 18, 201

RECEIVED

OCT 15 2014

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 [x] Other SWD
2. Name of Operator TORA Oil + Gas, LLC
3. Address of Operator P.O. Box 1267 JAL, N.M. 88252
4. Well Location
Unit Letter J : 1650 feet from the South line and 1650 feet from the East line
Section 1 Township 24-S Range 36E NMPM LEA County

WELL API NO. 30-025-243340000
5. Indicate Type of Lease
STATE [] FEB [x]
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name ARCO Camp
8. Well Number #2
9. OGRID Number
10. Pool name or Wildcat Langlie Mattie

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3345 DF

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [x] PLUG AND ABANDON []
TEMPORARILY ABANDON [] CHANGE PLANS []
PULL OR ALTER CASING [] MULTIPLE COMPL. []
DOWNHOLE COMMINGLE []
CLOSED-LOOP SYSTEM []
OTHER: []

SUBSEQUENT REPORT OF:

REMEDIAL WORK [] ALTERING CASING []
COMMENCE DRILLING OPNS. [] P AND A []
CASING/CEMENT JOB []
OTHER: []

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.

Rig up Pulling Unit + pull tubing + packer OK for LEAK

Per Underground Injection Control Program Manual

11.6 C Packer shall be set within or less than 100 feet of the uppermost injection perms or open hole.

Condition of Approval: notify

OCD Hobbs office 24 hours prior of running MIT Test & Chart

C.O.A.-SUBMIT WELLBORE DIAGRAM

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

[Empty box for Rig Release Date]

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

SIGNATURE W.E. Armstrong II TITLE Mgr. DATE 10-14-14

Type or print name W.E. Armstrong II E-mail address: geosea@valbenet.com PHONE: 575-631-7199

For State Use Only APPROVED BY: Makenzie Brown TITLE Dist. Supervisor DATE 10/15/2014

Conditions of Approval (if any):

OCT 17 2014