

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 August 1, 2011

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-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-005-10178
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ENDEAVOR ENERGY RESOURCES, LP		6. State Oil & Gas Lease No. K-4495
3. Address of Operator 110 N. MARIENFELD STREET, SUITE 200 MIDLAND, TEXAS 79710		7. Lease Name or Unit Agreement Name TOBAC SWD G
4. Well Location Unit Letter G : 1989 feet from the NORTH line and 1977 feet from the EAST line Section 16 Township 8S Range 33E NMPM County CHAVES		8. Well Number 16
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4418' DF		9. OGRID Number 190595
		10. Pool name or Wildcat 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"/>		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: <input type="checkbox"/>		OTHER: MIT <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.

ANNUAL UIC TEST. ATTACHED IS A COPY OF THE CHART 10/15/2014.

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 *Jan South* TITLE REGULATORY ANALYST DATE 10/16/2014

Type or print name JAN SOUTH E-mail address: JSOUTH@EERONLINE.COM PHONE: (432)687-1575

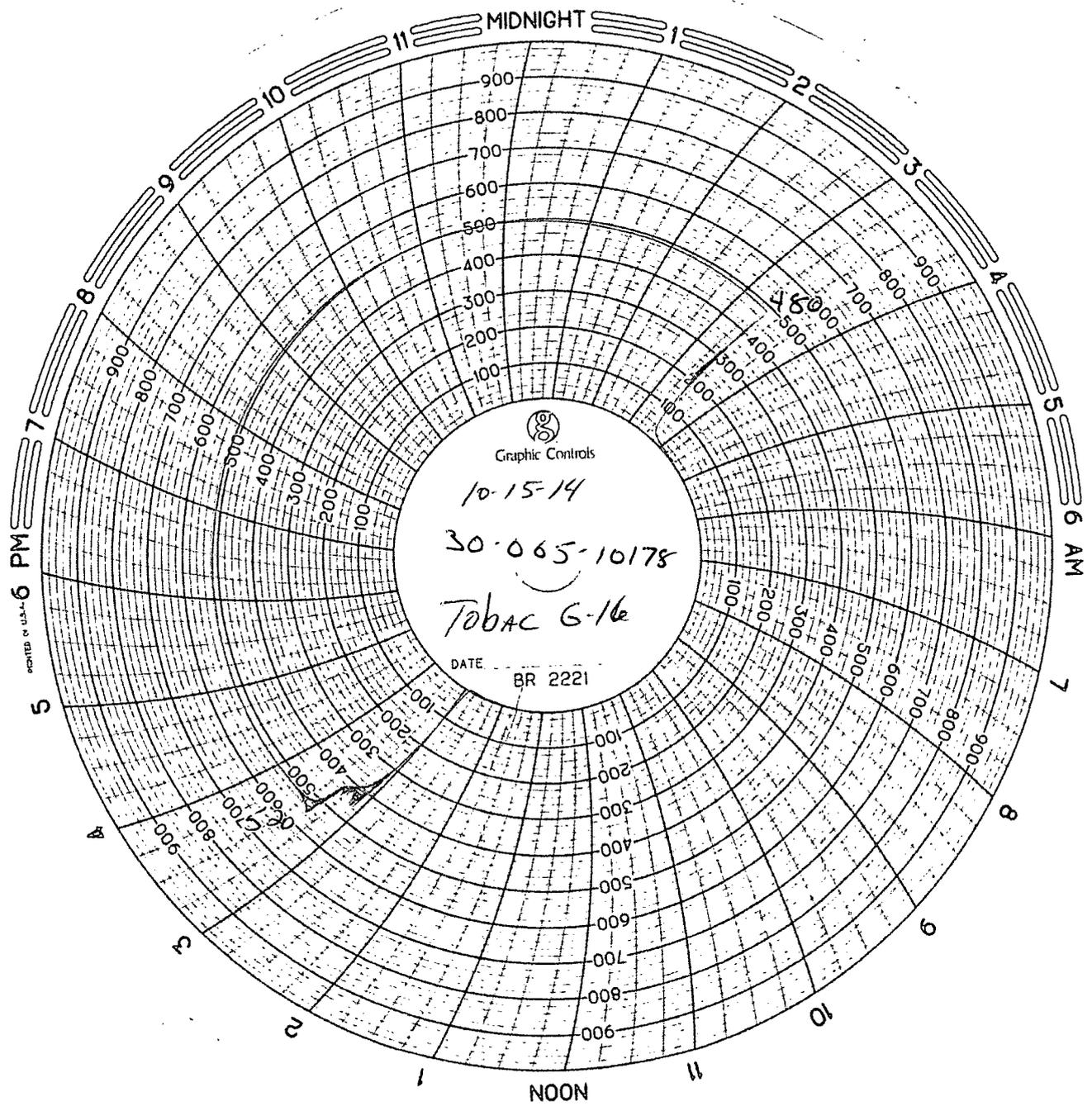
For State Use Only

APPROVED BY: *Bill Semmes* TITLE Staff Manager DATE 10/17/2014

Conditions of Approval (if any):

FOR RECORD ONLY

OCT 27 2014 *[Signature]*



BS 10/17/2014

FOR RECORD ONLY

CHART RECORDER
CALIBRATED TO 1000PSI 4-22-14
SER# 663678

DATE OF MET 10-15-14
ENDEAVOR ENERGY RESOURCES
TOBAC SWD SYSTEM WELL #G-16
John Zimmerman
ASSISTANT PRODUCTION FOREMAN

RECORDING EQUIPMENT OPERATOR
GANDY CORP. TATUM, NM
B. Simpson

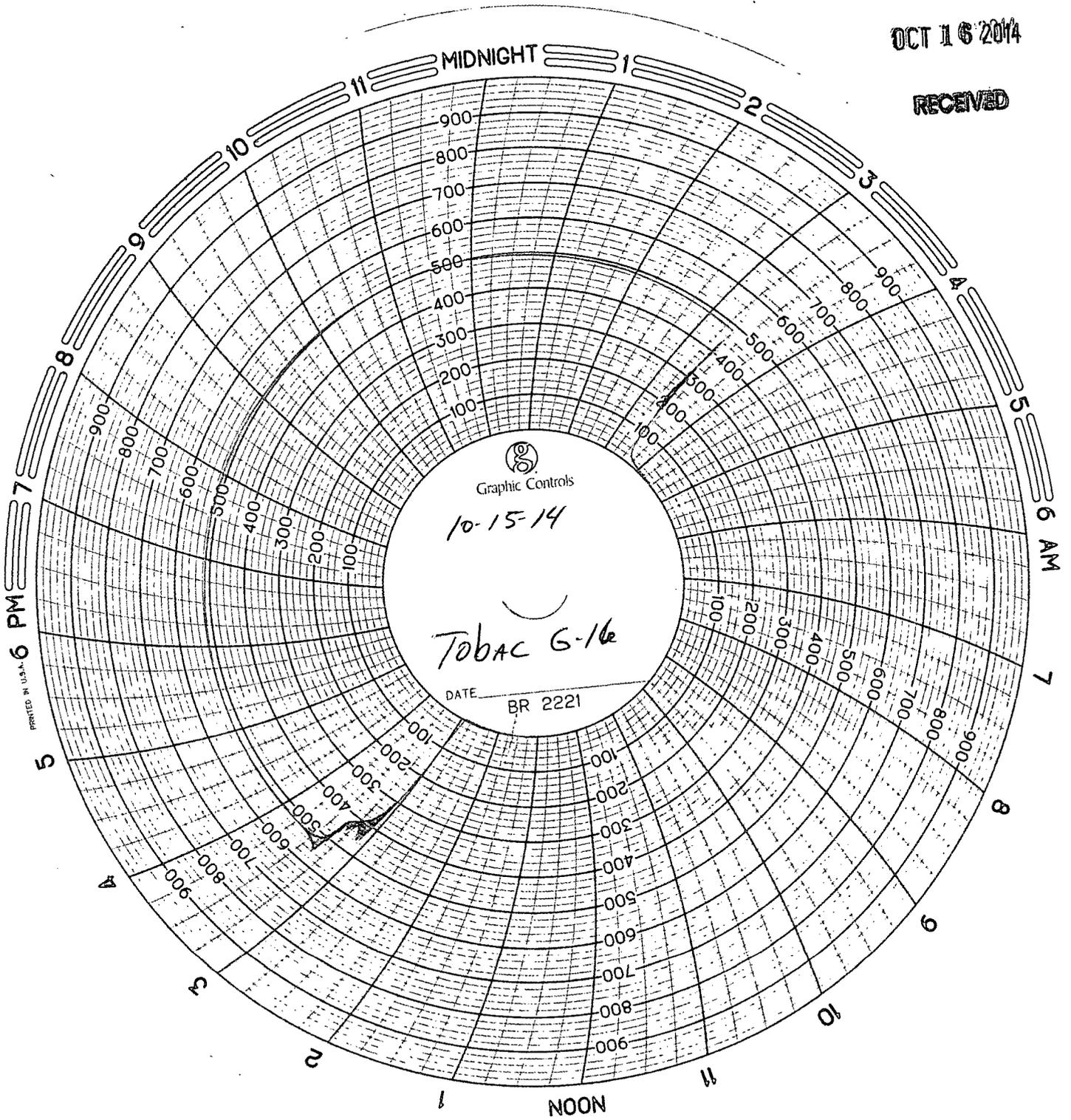
10-15-14

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HOLDSOED

OCT 16 2014

RECEIVED



2

CHART RECORDER
CALIBRATED TO 1000PSI 4-22-14
SER# 663678

DATE OF MIT 10-15-14
ENDEAVOR ENERGY RESOURCES
TOBAC SWD SYSTEM WELL #G-16
John Zimmerman
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GANDY CORP. TATUM, NM

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