

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

WELL API NO. 30-025-28695
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-11078
7. Lease Name or Unit Agreement Name N.C. STATE
8. Well Number 1
9. OGRID Number 190595
10. Pool name or Wildcat WOLFCAMP
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3819' GR

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 Other SWD

2. Name of Operator
 ENDEAVOR ENERGY RESOURCES, LP **OCT 17 2014**

3. Address of Operator
 110 N. MARIENFELD STREET, SUITE 200
 MIDLAND, TEXAS 79710 **RECEIVED**

4. Well Location
 Unit Letter A : 1320 feet from the NORTH line and 660 feet from the EAST line
 Section 3 Township 16S Range 32E NMPM County LEA

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"/>			
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 Semanaka* TITLE Staff Manager DATE 10/17/2014

Conditions of Approval (if any):
FOR RECORD ONLY **OCT 27 2014**

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

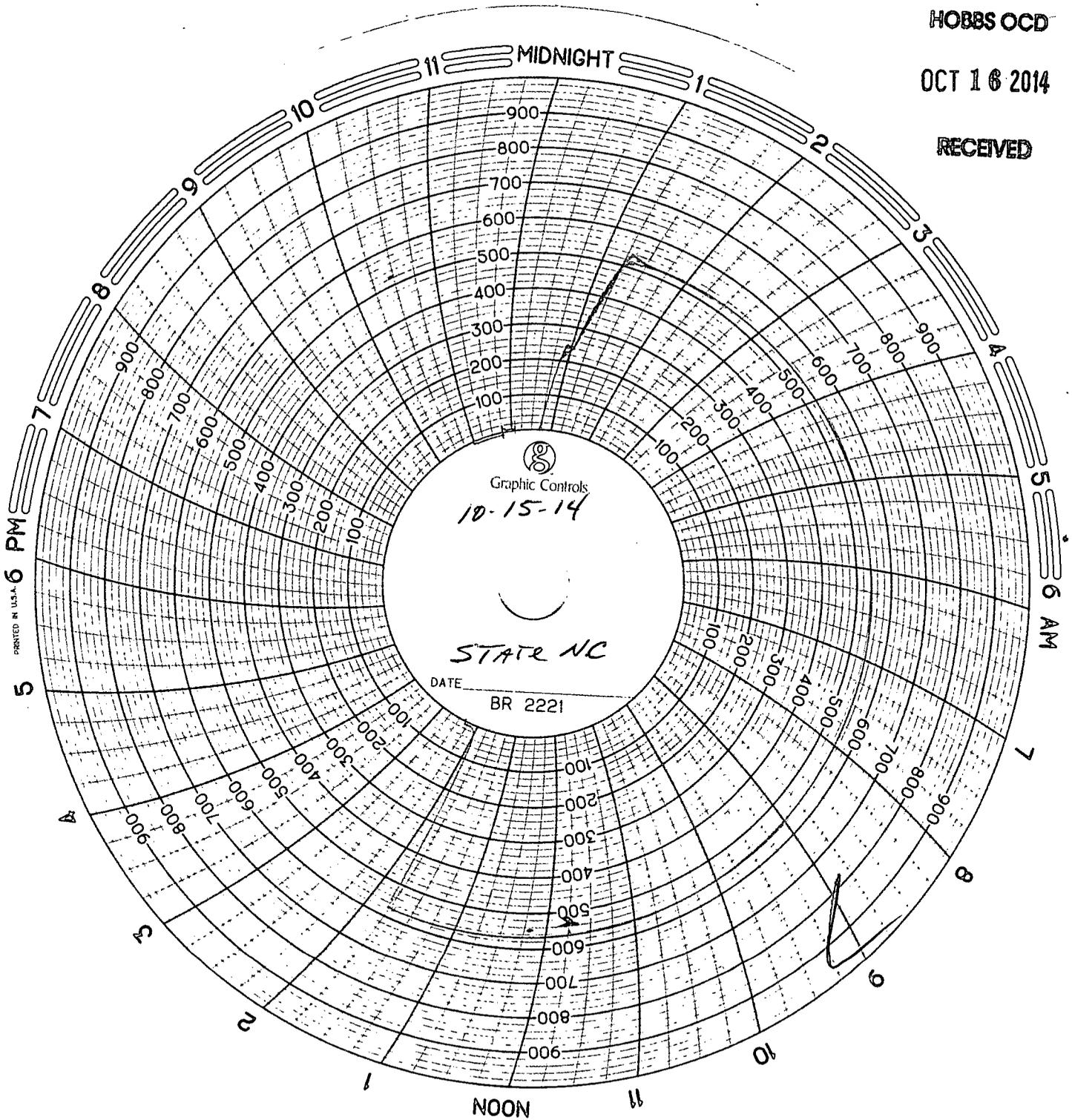
DATE OF MIT 10-15-14
ENDEAVOR ENERGY RESOURCES
STATE NC SWD #1
John Zimmerman
ASSISTANT PRODUCTION FOREMAN

RECORDING EQUIPMENT OPERATOR
GANDY CORP, TATUM, NM
B. Simpson
10-15-14

HOBBS OCD

OCT 16 2014

RECEIVED



Graphic Controls

10-15-14

STAIR NC

DATE BR 2221

PRINTED IN U.S.A.

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

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