

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. 30-025-42042
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NBR 7 State
8. Well Number 44
9. OGRID Number 16696
10. Pool name or Wildcat Red Tank; Bone Spring, East

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 ☐

2. Name of Operator **OKY USA INC.**

3. Address of Operator **P.O. Box 50250 Midland, Tx 79710**

4. Well Location
Unit Letter **B** : **370** feet from the **North** line and **2250** feet from the **East** line
Section **18** Township **22S** Range **33E** NMPM County **LEA**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3610'

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 checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

Spud 14-3/4" hole 10/17/14, drill to 990', 10/17/14. RIH & set 11-3/4" 47# J-55 BTC csg @ 990', pump 40BFW spacer w/ red dye, then cmt w/ 340sx (105bbl) PPC w/ additives 13.5ppg 1.73 yield followed by 300sx (71bbl) PPC w/ additives 14.8ppg 1.35 yield, had full returns, circ 299sx (92bbl) cmt to surface. 10/19/14, RU BOP, test @ 250# low 5000# high, test csg to 2150# for 30 min, tested good. RIH & tag cmt @ 944', drill new formation to 1000', perform FIT test to 140psi, EMW=13.0ppg, passed.

Spud Date:

10/17/14

Rig Release Date:

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

SIGNATURE

[Signature]

TITLE

Regulatory Coordinator

DATE

10/24/14

Type or print name

Jenelyn Mendiola

E-mail address:

jenelyn_mendiola@nmsr.com

PHONE:

432-685-5936

For State Use Only

APPROVED BY:

[Signature]

TITLE

Petroleum Engineer

DATE

10/27/14

Conditions of Approval (if any):

OCT 27 2014

MB

me