

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  
HOBBS OCD 1220 South St. Francis Dr.  
Santa Fe, NM 87505

OCT 23 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.)		WELL API NO. <u>30-025-32747 -</u>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>Amtex Energy, Inc.</u>		6. State Oil & Gas Lease No. <u>EO-7824</u>
3. Address of Operator <u>P.O. Box 3418, Midland, TX 79702</u>		7. Lease Name or Unit Agreement Name <u>Chukar State</u>
4. Well Location Unit Letter <u>O</u> : <u>330</u> feet from the <u>South</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>16</u> Township <u>19S</u> Range <u>34E</u> NMPM <u>Lea</u> County <u>Lea</u>		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>GL: 3767'</u>		9. OGRID Number <u>000785</u>
		10. Pool name or Wildcat <u>Pearl; Queen</u>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: Request for TA status. ☒

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.

> 3 month TA Status Request. 8/1/00.

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

William J. Savage

TITLE

President

DATE

10/21/14

Type or print name

William J. Savage

E-mail address:

wsavage@amtenergy.com

PHONE:

432/686-0847

For State Use Only

APPROVED BY:

Bep Semanah

TITLE

Staff Manager

DATE

10/24/2014

Conditions of Approval (if any):

FOR RECORD ONLY

OCT 28 2014

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