

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. 30-025-29313
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 Mahaffey Bryan
8. Well Number #3
9. OGRID Number 14070
10. Pool name or Wildcat Pearl Queen
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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  
State of New Mexico formerly Marks & Garner LTD Co

3. Address of Operator  
1625 N. French Drive Hobbs, NM 88240

4. Well Location  
 Unit Letter N : 330 feet from the South line and 1650 feet from the FWL line  
 Section 13 Township 19S Range 35E NMPM Lea County

HOBBS OCD  
 NOV 04 2014  
 RECEIVED

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" 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: <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.

1/7/2013 Moved in rigged up. Moved in remaining equipment. Laid down rods. Installed BOP. Worked anchor free and tallied tubing out of the hole. Dug out cellar. SION

1/8/2013 Picked up 5 1/2" scrapper and RIH to 4800'. POOH with scrapper and picked up 5 1/2" CIBP. RIH to 4798' and set CIBP. Circulated hole with brine and mud. Spotted 25 sx class c cement on top of CIBP. POOH with tubing. Rigged up wireline and perforated at 3350'. SION

1/9/2013 RIH and set packer to squeeze the holes at 3350'. Perforations would not take fluid. Released packer and spotted 25 sx class c cement 50' below perfs. WOC and tagged at 3126'. POOH with tubing and perforated casing at 1899'. RIH with packer to squeeze perfs at 1899'. Would not take fluid. Released packer and spotted 25 sx class c cement at 1952'. POOH and SION.

1/10/2013 RIH and tagged cement at 1664'. Laid down remaining tubing. Rigged up wireline and perforated 5 1/2" casing at 400'. Closed BOP and circulated class c cement down 5 1/2" casing to perforations at 400' and up 5 1/2" X 8 5/8" annulus to surface with 110 sx. OCD in Hobbs requested to circulate from 400' to surface instead of squeezing holes at 400' with 25 sx and circulating from 60' to surface. Cut off well head and observed cement was to surface on both strings of casing. Installed cap on 8 5/8" casing but did not finish installing marker because of dark. SION

1/11/2013 Finished installing marker, cut off anchors, and filled in cellar. Moved service unit and remaining equipment to Lovington yard.

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

SIGNATURE MB TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 For State Use Only

APPROVED BY [Signature] TITLE DIST MGR DATE 1-4-2013  
 Conditions of Approval (if any): \_\_\_\_\_

NOV 04 2014

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