

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. <b>30-025-40604</b>
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 <b>Caza Operating, LLC</b>		6. State Oil & Gas Lease No. <b>VB-1758</b>
3. Address of Operator <b>200 N. Loraine, Suite 1550, Midland, Texas 79701</b>		7. Lease Name or Unit Agreement Name <b>Igloo 19 State</b>
4. Well Location Unit Letter <b>A</b> : <b>200</b> feet from the <b>North</b> line and <b>660</b> feet from the <b>East</b> line Section <b>19</b> Township <b>20 S</b> Range <b>35 E</b> NMPM County <b>Lea</b>		8. Well Number <b>2H</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3677 GR</b>		9. OGRID Number <b>249099</b>
		10. Pool name or Wildcat <b>Lea; Bone Sprgs, South 37580</b>

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 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: <b>Well Name Change</b> <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.

10-15-2014: Drill from surface to 1800'. ~~Run 1800' 13-3/8" 54.5# J-55 ST&C casing. Cemented surface casing w/ 1150 sacks "C" mixed 4% Gel + 2% Calc 13.5 ppg, Tail Slurry 300 sacks "C" mixed 2% Calc 14.8 ppg, cemented to surface, circulated 200 sacks to pit, floats held~~  
10-16-2014: Waited on cement 19.5 hrs (8:30 AM 10/15/14 to 4:00 AM 10/16/14), tested casing to 1250 psi for 30 minutes

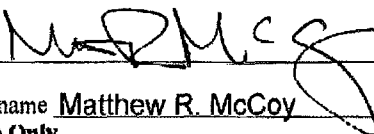
Spud Date:

10-13-2014

Rig Release Date:

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

SIGNATURE



TITLE Operations Engineer

DATE

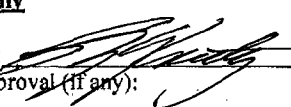
12/16/2014

Type or print name **Matthew R. McCoy**

E-mail address: **mmccoy@cazapetro.com** PHONE: **432 682 7424**

**For State Use Only**

APPROVED BY:



TITLE

Petroleum Engineer

DATE

12/18/14

Conditions of Approval (if any):

DEC 19 2014