

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

| |
|---|
| WELL API NO. 30-025-26356 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. 40359 |
| 7. Lease Name or Unit Agreement Name BOBBI State WF Unit |
| 8. Well Number 1Y |
| 9. OGRID Number 232611 |
| 10. Pool name or Wildcat Arkansas Junction (San Andres) West |

SUNDRIY 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
SUNDOWN ENERGY LP

3. Address of Operator
13455 NOEL RD, STE. 2000, DALLAS, TX 75240

4. Well Location
Unit Letter J : 1980 feet from the SOUTH line and 1930 feet from the EAST line
Section 20 Township 18S Range 36E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3832' GR

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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| OTHER: Change name of Well from: Bobbi #1Y | CASING/CEMENT JOB <input type="checkbox"/> |
| Change Name of Well to: Bobbi State Waterflood Unit #10 | 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.

**CHANGE NAME OF WELL FROM: BOBBI #1Y (BOBBI STATE WATERFLOOD UNIT #1Y)

CHANGE NAME OF WELL TO: BOBBI STATE WATERFLOOD UNIT #10

R-13731

Spud Date:

Rig Release Date:

OPER. OGRID NO. 232611
PROPERTY NO. 40359
POOL CODE 2503
EFF. DATE 8/13/2013
API NO. 30-025-26356

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

SIGNATURE Belinda Bradley TITLE Admin, Asst DATE 1-15-2015

Type or print name Belinda Bradley E-mail address bbradley@sundownenergy.com PHONE: 432-943-8770

For State Use Only

APPROVED BY [Signature] TITLE Petroleum Engineer DATE 01/22/15

Conditions of Approval (if any):

JAN 26 2015