

Submit 3 Copies 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
May 27, 2004

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

WELL API NO. 30-025-03151

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
Sotuh Vacuum Unit

8. Well Number 352

9. OGRID Number

10. Pool name or Wildcat
Vacuum: Wolfcamp, South

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

HOBBS OCD

2. Name of Operator Paladin Energy Corp.

MAR 10 2015

3. Address of Operator
10290 Monroe Dr., Suite 301, Dallas, Texas 75229

4. Well Location

Unit Letter I : 1980 feet from the South line and 660 feet from the East line
Section 35 Township 18S Range 35E NMPM Lea County

RECEIVED

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3862' GR

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 ☐

OTHER: T&A ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Condition of Approval: notify

OCD Hobbs office 24 hours

prior of running MIT Test & Chart

Request approval to T&A Wellbore.

Ru pumping unit. CIBP set at 9,850' above perforations from 9,920-952', 9,970-10,080', 10,100-130', 10,196-202'. Fill Casing with fluid, test 5-1/2" casing to 500# for 30 minutes. Record chart.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE VP Exploration & Production DATE 3/5/2015

Type or print name

E-mail address:

Telephone No.

For State Use Only

APPROVED BY: [Signature] TITLE Dist. Supervisor DATE 3/11/2015

Conditions of Approval (if any)

C.O.A.-SUBMIT WELLBORE DIAGRAM

CONDITION OF APPROVAL: Notify OCD DISTRICT OFFICE
24 HOURS prior to running the TA Pressure Test.

MAR 12 2015