

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

RECEIVED

Form C-103
Revised July 18, 2013

WELL API NO. 30-025-23568 ✓	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. 312479	
7. Lease Name or Unit Agreement Name NORTH VAC. ABO UNIT ✓	
8. Well Number 145	
9. OGRID Number 298299	
10. Pool name or Wildcat NORTH VAC-ABO	
4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>S</u> line and <u>860</u> feet from the <u>E</u> line Section <u>27</u> Township <u>17-S</u> Range <u>34-E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4035 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"/>	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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" 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.

5 YR. MIT TEST 3/4/15
(START PRESSURE 360, END PRESSURE 360)
CHART ATTACHED

Spud Date:

9/22/1970

Rig Release Date:

10/22/1970

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

SIGNATURE

Laura Stone

TITLE

Regulatory Compliance

DATE 3/18/2015

Type or print name LAURA STONE

E-mail address: rgrigg@mspartners.com

PHONE: 817-334-7842

For State Use Only

APPROVED BY:

Bill Samanah

TITLE

Staff Manager

DATE

3/31/2015

Conditions of Approval (if any):

APR 02 2015

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