

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

WELL API NO. 30-025-42121
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. Fee
7. Lease Name or Unit Agreement Name Dog Bar 11 Fee
8. Well Number 2H
9. OGRID Number 231429
10. Pool name or Wildcat Bronco San Andres, South

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐ MAY 08 2015

2. Name of Operator
Manzano, LLC

3. Address of Operator
P.O. Box 2107, Roswell, NM 88202-2107 RECEIVED

4. Well Location
Unit Letter N : 200 feet from the South line and 2200 feet from the West line
Section 11 Township 14S Range 38E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL = 3768, KB = 3785

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 checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <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.

Spud 15 1/4 hole 7 a.m. on 10/16/2014. Drilled to 439 feet. TD surface hole at 11:30 a.m. on 10/16/2014. Ran 13 3/8" 48#/ft casing to 439 feet. Cemented with 440 sxs Premium Plus C Cement. Plug down at 7 p.m. 10/16/2014. Circulated 154 sxs to pits. Cut off casing, NU wellhead. NU BOPE and test to 500 #. Drill out of 13 3/8' casing with 12 1/4" bit at 8:00 a.m. on 10/17/2014.

Spud Date:

10/16/2014

Rig Release Date:

10/28/2014

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

SIGNATURE Mike Hanagan TITLE Manager DATE 5/8/2015

Type or print name Mike Hanagan E-mail address: mike@manzanogenergy.com PHONE: 575-623-1996

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 05/08/15

Conditions of Approval (if any):

MAY 13 2015

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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 type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Manzano, LLC		6. State Oil & Gas Lease No. Fee
3. Address of Operator P.O. Box 2107, Roswell, NM 88202-2107		7. Lease Name or Unit Agreement Name Dog Bar 11 Fee
4. Well Location Unit Letter N : 200 feet from the South line and 2200 feet from the West line Section 11 Township 14S Range 38E NMPM Lea County		8. Well Number 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL = 3768, KB = 3785		9. OGRID Number 231429
		10. Pool name or Wildcat Bronco San Andres, South

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NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

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

TD 12 1/4 hole at 2300 feet at 6:45 a.m. on 10/18/2014.

Ran 2300 feet of 9 5/8 36#/ft J-55 LTC casing. Cemented 9 5/8" casing with 600 sxs Premium Plus-C cement and 250 sxs Premium Plus-C cement. Plug down at 7 p.m. on 10/18/2014. Circulated 341 sxs to surface. Cut off casing. NU wellhead and NU BOPE & test to 500 #. Drill out of 9 5/8 casing with 7 7/8" bit at 2:30 p.m. 10/19/2014.

Spud Date:

10/16/2014

Rig Release Date:

10/28/2014

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

SIGNATURE

Mike Hanagan

TITLE

Manager

DATE

5/8/2015

Type or print name Mike Hanagan

E-mail address:

mike@manzanoenergy.com

PHONE: 575-623-1996

For State Use Only

APPROVED BY:

[Signature]

TITLE

Petroleum Engineer

DATE

09/08/15

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4. Well Location Unit Letter <u>N</u> : <u>200</u> feet from the <u>South</u> line and <u>2200</u> feet from the <u>West</u> line Section <u>11</u> Township <u>14S</u> Range <u>38E</u> NMPM <u>Lea</u> County		8. Well Number 2H
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CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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Drilled 7 7/8" hole KOP @ 4921 feet. Drilled 7 7/8" lateral to TD of 9890' MD/5388' TVD on 10/26/2014 at 4:45 p.m. Ran 230 jts of 5.5" L-80 20#/ft BTC casing and set at 9890 feet. Cemented with 650 sxs PremPlus C 50/50 POZ + 1000 sxs PremPlus C 50/50 POZ. Circulated 62 sxs to pit. Released rig at 1:00 a.m. on 10/28/2014.

Spud Date:

10/16/2014

Rig Release Date:

10/28/2014

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

SIGNATURE

Mike Hanagan

TITLE

Manager

DATE

5/8/2015

Type or print name Mike Hanagan

E-mail address:

mike@manzanocenergy.com

PHONE: 575-623-1996

For State Use Only

APPROVED BY:

[Signature]

TITLE

Petroleum Engineer

DATE

05/08/15

Conditions of Approval (if any):