

Submit 1 Copy To Appropriate District Office

State of New Mexico

Form C-103

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

Geology, Minerals and Natural Resources

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Revised August 1, 2011

HOBBS OCD
JUN 04 2015
RECEIVED

WELL API NO. 30-025-37018 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name North Vacuum ABO Unit ¹²
8. Well Number 003 123
9. OGRID Number 277558
10. Pool name or Wildcat North Vacuum (Abo)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4037' GR

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

2. Name of Operator
Lime Rock Resources II-A, L.P.

3. Address of Operator
1111 Bagby St. Suite 4600, Houston, TX 77002

4. Well Location
Unit Letter O: 608 feet from the South line and 1777 feet from the East line
Section 36 Township 16S Range 34E NMPM Lea County

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- DOWNHOLE COMMINGLE
- PLUG AND ABANDON
- CHANGE PLANS
- MULTIPLE COMPL

SUBSEQUENT REPORT OF:

- REMEDIAL WORK
- COMMENCE DRILLING OPNS.
- CASING/CEMENT JOB
- ALTERING CASING
- P AND A

OTHER:

2 YEAR

OTHER: Extension of TA Status

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.

Well is currently in Expired TA Status.

We are requesting an TA Extension & will run a current MIT test once we get approval.

**Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart**

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

[Empty box for Rig Release Date]

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

SIGNATURE

Michael Barrett

TITLE Production Supervisor

DATE 06/04/15

Type or print name
For State Use Only

Michael Barrett

E-mail address: mbarrett@limerockresources.com PHONE: 575-623-8424

APPROVED BY:

Mary Brown

TITLE Dist. Supervisor

DATE 6/10/2015

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

No PROD REPORTED 79 Months

JUN 10 2015