

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 August 1, 2011

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

WELL API NO. 30-025-37018
5. Indicate Type of Lease STATE ☒ FEE ☐
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)

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
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4037' GR

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

E-PERMITTING P&A NR _____ INT P&A _____ CSNG _____ TA W/CHART <u>PM</u> P&A R _____ COMP _____ CHG LOG _____ RBDMS <u>YAD</u>	SUBSEQUENT REPORT OF: REMEDIAL WORK ☐ ALTERING CASING ☐ COMMENCE DRILLING OPNS. ☐ P AND A ☐ CASING/CEMENT JOB ☐ OTHER: <u>T/A EXTENSION</u> ☒
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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.

Requesting a TA Extension.
See attached Chart.

This Approval of Temporary
Abandonment Expires 6/17/2017

Spud Date:

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 06/19/15

Type or print name Michael Barrett E-mail address: mbarrett@limerockresources.com PHONE: 575-623-8424

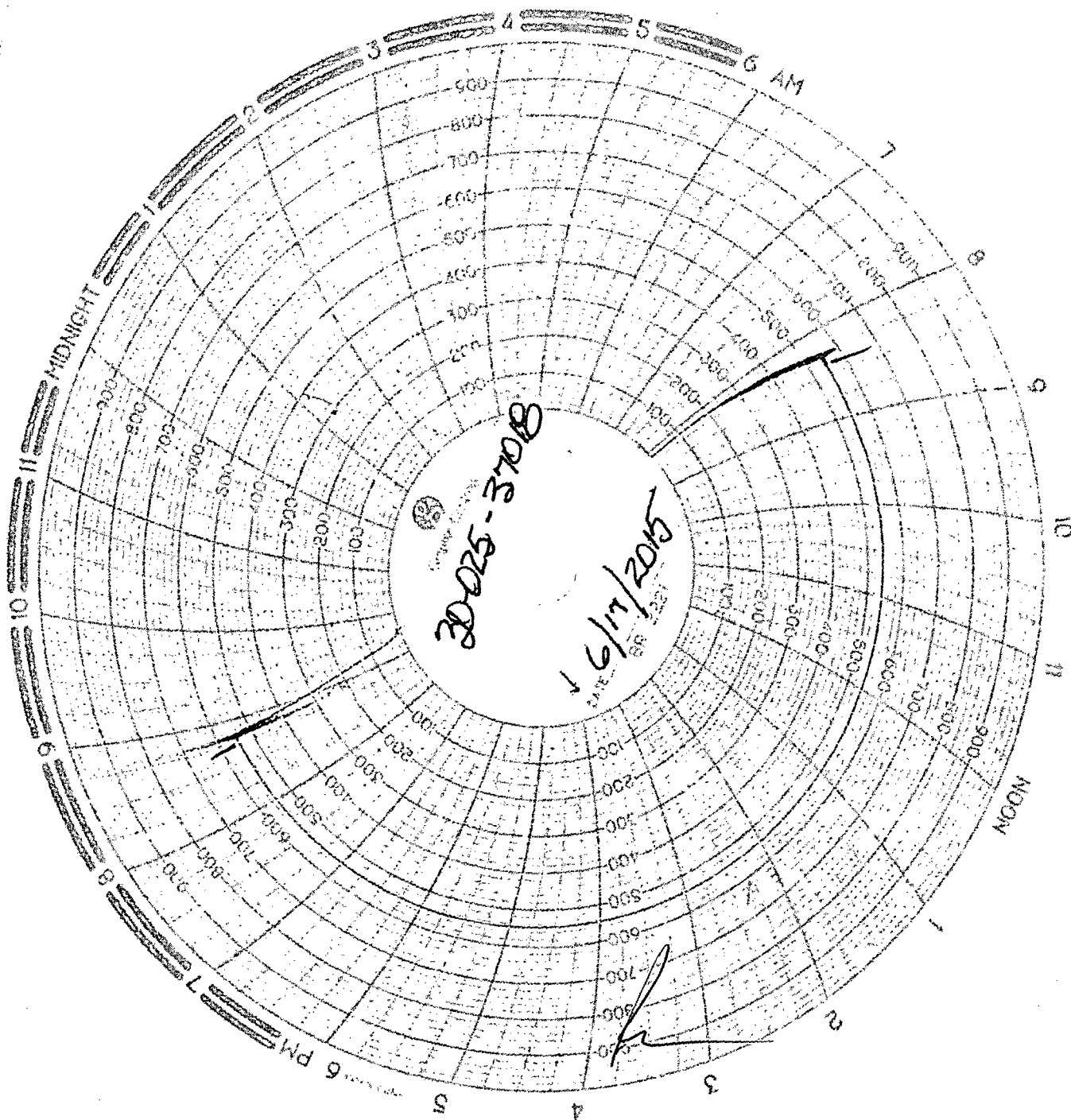
For State Use Only

APPROVED BY: Michael Barrett TITLE Dist. Supervisor DATE 6/19/2015

Conditions of Approval (if any):

JUN 22 2015

MB



6-17-15
GANDY CGP
WICK J. UNIT 610
LRE
NORTH VACUM ASD UNIT # 123