

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.	30-025-08645
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	Cone Jalmat Yates Pool Unit
8. Well Number	303
9. OGRID Number	370080
10. Pool name or Wildcat	Jalmat, Tansill-Yates-7 Rivers
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3576 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 **WIW**

2. Name of Operator  
**BREITBURN OPERATING**

3. Address of Operator  
**1401 McKinney St. Suite 2400, Houston Texas 77010**

4. Well Location  
Unit Letter **G** : **1980** feet from the **N** line and **1980** feet from the **E** line  
Section **24** Township **22S** Range **35E** NMPM County **LEA**

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: <b>MIT TEST</b>	<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.

PERFORM 5 YEAR UIC MIT TEST, CHART ATTACHED

Spud Date:

09/05/1956

Rig Release Date:

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

SIGNATURE

*Cam Robbins*

TITLE FORMAN

DATE 08/19/2015

Type or print name CAM ROBBINS

E-mail address: cam.robbins@breitburn.com

PHONE: 432-425-3001

For State Use Only

APPROVED BY:

*Beth Semanaka*

TITLE

Staff Manager

DATE

9/23/2015

Conditions of Approval (if any):

SEP 24 2015

