

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. 30-041-10243
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-3935
7. Lease Name or Unit Agreement Name HALEY SAN ANDRES UNIT
8. Well Number #7
9. OGRID Number 164557
10. Pool name or Wildcat SAN ANDRES, Chaveroo

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 (INJECTOR) **HOBBS OCD**

2. Name of Operator
RIDGEWAY ARIZONA OIL CORP **OCT 16 2015**

3. Address of Operator
777 N. ELDRIDGE PARKWAY, SUITE 150, HOUSTON, TX 77079 **RECEIVED**

4. Well Location
Unit Letter **B** : 660 feet from the NORTH line and 1980 feet from the EAST line
Section 34 Township 7S Range 33E NMPM County ROOSEVELT

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

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 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.

WELL WILL NOT PASS MIT. INTEND TO REPAIR WELL.

- RU, POOH WITH TUBING & EXISTING PACKER.
- RIH WITH BIT & SCRAPER TO BOTTOM & CLEAN OUT FILL
- RIH W/PACKER & PLUG. TEST CASING. IF CASING NEEDS REPAIR, LOCATE HOLE & SQUEEZE. DRILL OUT CEMENT.
- RIH WITH 2 3/8" TUBING AND PACKER. SET PACKER AT APPROXIMATELY 4050'
- TEST ANNULUS TO 500 PSI. NIPPLE UP WELL HEAD. RDMO
- CONTACT OCD TO WITNESS MIT AND T/A WELL

The Oil Conservation Division
MUST BE NOTIFIED 24 Hours
Prior to the beginning of operations

C.O.A SUBMIT CURRENT WELLBORE DIAGRAM.

CONTACT OCD PRIOR TO
IF WELL REMAINS INCAPABLE OF PASSING MIT, A DECISION WILL BE MADE TO EITHER SLIM HOLE OR P&A WELL

Per Underground Injection Control Program Manual

Spud **1166** Packer shall be set within or less than **100** feet of the uppermost injection perms or open hole.

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

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

SIGNATURE Jamie Hogue TITLE: VP REGULATORY AFFAIRS DATE 10-6-2015

Type or print name JAMIE HOGUE E-mail address: jhogue@enhancedoilres.com PHONE: 832-485-8522

For State Use Only

APPROVED BY: Mary Brown TITLE: District Supervisor DATE: 10/19/2015
Conditions of Approval (if any): 95 MONTHS - NO PROD REPORTED OCT 20 2015