

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-36987
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. GT-1996
7. Lease Name or Unit Agreement Name OPL 4 State
8. Well Number #1
9. OGRID Number 113315
10. Pool name or Wildcat Lovington, Drinkard

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 HOBBBS-001) PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	OCT 19 2015
2. Name of Operator Texland Petroleum-Hobbs, LLC	
3. Address of Operator 777 Main Street, Suite 3200, Fort Worth, Texas 76102	RECEIVED
4. Well Location Unit Letter <u>P</u> : <u>440</u> feet from the <u>South</u> line and <u>440</u> feet from the <u>East</u> line Section <u>4</u> Township <u>17S</u> Range <u>36E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3894'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: recompletion <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Texland Petroleum-Hobbs proposes to TA this well as follows:

Set CIBP @ 8395' w/5 sks CI "C" cmt plug
Circ hole and pressure test to 500 psi/30 min

PERFS 8440-8520

hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Vickie Smith TITLE Regulatory Analyst DATE 10/19/15

Type or print name Vickie Smith E-mail address: vsmith@texpetro.com Telephone No. 575-433-8395

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 10/21/15
Conditions of Approval (if any):

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

*CIBP MUST BE SET WITHIN 100' OF
UPPERMOST PERF*

OCT 21 2015

[Handwritten mark]