

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

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

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

4. Well Location
 Unit Letter **N** : **990** feet from the **SOUTH** line and **1980** feet from the **WEST** line
 Section **34** Township **7S** Range **33E** NMPM County **ROOSEVELT**

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

WELL API NO.
 30-041-10450 ✓

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.
 K-1369

7. Lease Name or Unit Agreement Name
HALEY SAN ANDRES UNIT ✓

8. Well Number #29 ✓

9. OGRID Number
 164557

10. Pool name or Wildcat
SAN ANDRES; Chayeroo

OCT 16 2015
RECEIVED

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 4120'
- 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.

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 **10-6-2015** **C Packer shall be set within or less than 100 feet of the uppermost injection perfs 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 J. 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**

APPROVED BY: Malyse Brown TITLE: District Supervisor DATE: 10/20/2015

Conditions of Approval (if any):

OCT 20 2015