

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.)		WELL API NO. 30-025-01008
1. Type of Well: <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator STEVENSON OIL CO., INC.		6. State Oil & Gas Lease No. L-4525
3. Address of Operator 1709 N. 9 TH STREET, LOVINGTON, NM 88260		7. Lease Name or Unit Agreement Name STATE BTQ
4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line Section <u>33</u> Township <u>11S</u> Range <u>33E</u> NMPM Lea County		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>258867</u>
		10. Pool name or Wildcat BAGLEY;PERMO PENN, N.

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"/>	REMEDIAL WORK	<input checked="" type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	COMMENCE DRILLING OPNS.	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	CASING/CEMENT JOB	<input type="checkbox"/>
DOWNHOLE COMMINGLE	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>
CLOSED-LOOP SYSTEM	<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.

PERFORMED REMEDIAL WORK AND PREPARE TO RETURN TO PRODUCTION:

9/28/15 - POOH with tbg. Pick up bailer and run in hole. Bail well. Put bottom assembly on pipe. RIH. Nipple up well head. RIH with pump. Hang well on. Check pump action.

10/23/15 - Set pumping unit. Wait on gas connection.

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

SIGNATURE Debbie McKelvey TITLE AGENT DATE 11/5/15

Type or print name Debbie McKelvey E-mail address: debmckelvey@earthlink.net PHONE: 575-392-3575

For State Use Only

APPROVED BY: Bil Sanamake TITLE Staff Manager DATE 11/16/2015

Conditions of Approval (if any):

NOV 18 2015