

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. 30-025-31000
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L-332
7. Lease Name or Unit Agreement Name Sunray A 6822 Ltd
8. Well Number 001
9. OGRID Number 006550
10. Pool name or Wildcat Lane San Andres 37000

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 Pressure Maintenance Inj.

2. Name of Operator
DWIGHT A TIPTON

3. Address of Operator
c/o Oil Reports & Gas Services, Inc 1008 W Broadway Hobbs NM 88240

4. Well Location
 Unit Letter O : 990 feet from the South line and 1980 feet from the East line
 Section 36 Township 9S Range 33E NMPM County Lea

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

HOBBS OCD
 NOV 20 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 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: Return to Injection <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.

Pull well due to pkr failure, changed out tubing
 Open pressure 340#
 Close pressure 320#

(See Attachment)

*Need Annual MIT performed
 due to polymer being in treat water.
 BS*

Spud Date: Rig Release Date:

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

SIGNATURE *Dwight A Tipton* TITLE Agent DATE 11/16/15
 Type or print name _____ E-mail address: gheard@oilreportsinc.com PHONE: 575-393-2727

For State Use Only
 APPROVED BY: *Bee Samaras* TITLE Staff Manager DATE 12/1/15
 Conditions of Approval (if any):

DEC 02 2015 fm

BR 2221
11/2/15

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Dwight A. Tipton
Sun Ray A-6822 #1
30-025-31000
0-36-95-33E

Cal: 0. Date: 5/10/15
Start: 1000 #
End: 500 #
39 min

Spencer Brown - ocd
Dwight A. Tipton

BR
12/1/15

