

HOBBS OCD

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1624 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.	30-025-09200
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	26711
7. Lease Name or Unit Agreement Name	King C
8. Well Number	002
9. OGRID Number	002799
10. Pool name or Wildcat	GRANSBURG LANSLIE MATTIX, TRVRSQ
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3427 RKB

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

2. Name of Operator  
Breck Operating Corp.

3. Address of Operator  
P O Box 911 Breckenridge Texas 76424

4. Well Location  
Unit Letter B : 330 feet from the N line and 2310 feet from the E line  
Section 1 Township T3S Range 36E NMPM County LEA

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: <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.

5 YEAR MIT TA'd WELL EXTENSION  
2

This Approval of Temporary Abandonment Expires 1-29-18

Spud Date:  Rig Release Date:

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

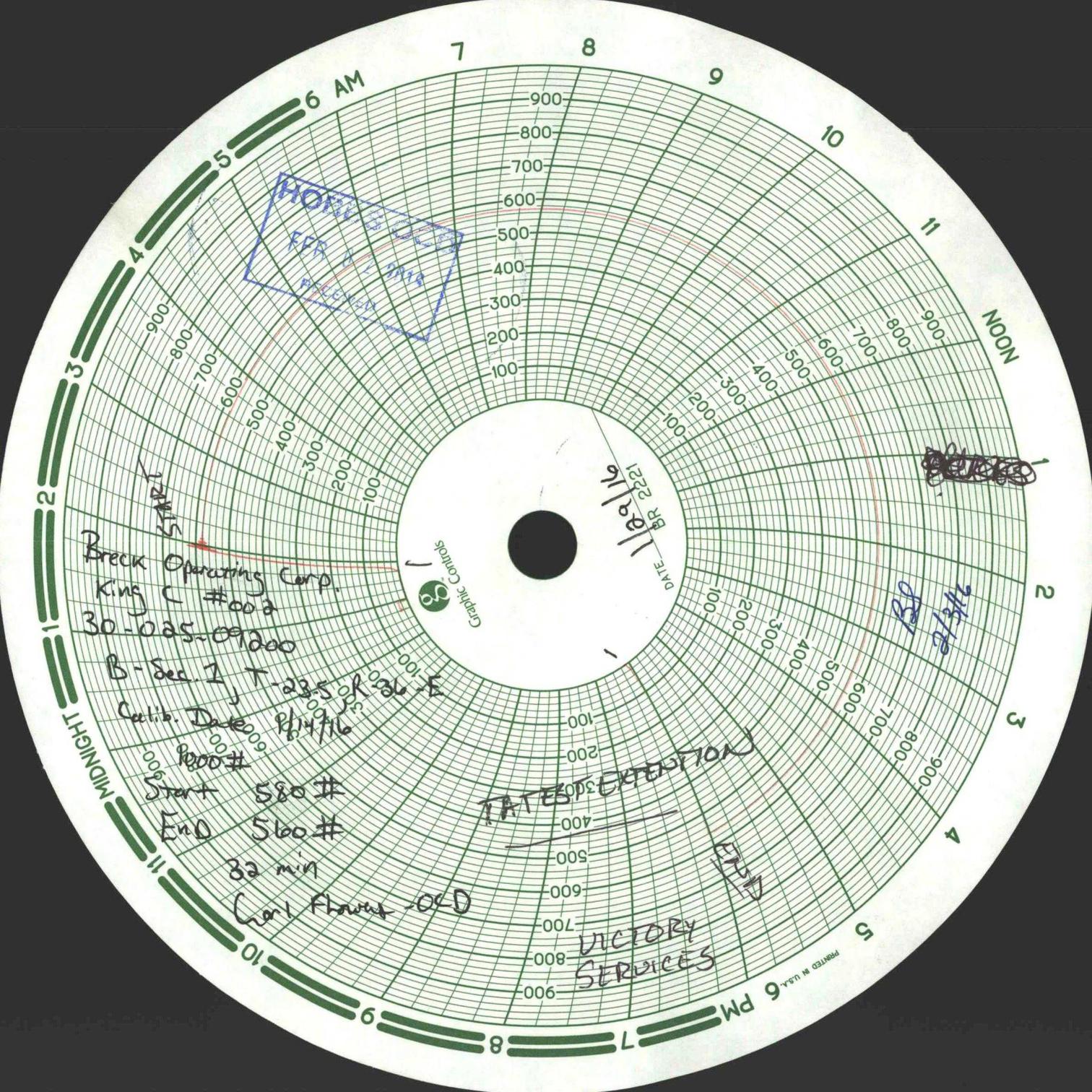
SIGNATURE Kevin Breckel TITLE Production Superintendent DATE 1-29-16

Type or print name Kevin Breckel E-mail address: kbreckel@breckop.com PHONE: 254-559-0881

APPROVED BY: Bill Samanah TITLE Staff Manager DATE 1-29-16

Conditions of Approval (if any): 2/3/16

FEB 04 2016



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Graphic Controls  
3

DATE 11/29/16  
BR 2521

BRECK OPERATING CORP.  
King C #002  
30-025-09200  
B-SEC 1 T-235 R-26-E  
Calib. Date 11/4/16  
1000#  
Start 580#  
End 560#  
32 min  
Carl Flower -OCD

TATE'S EXTENSION

VICTORY SERVICES

~~11/29/16~~

2/16/16  
BP

HOPKINS  
RPA  
11/29/16

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