

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. 30-025-42757
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-1972
7. Lease Name or Unit Agreement Name Yates 16 State
8. Well Number 1H
9. OGRID Number 270329
10. Pool name or Wildcat Jabalina; Delaware SW
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3255.9' GR

HOBBS OCD
 JAN 14 2016
 RECEIVED

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
Endurance Resources LLC

3. Address of Operator
203 West Wall St Suite 1000 Midland Texas 79701

4. Well Location
 Unit Letter D : 230 feet from the north _____ line and 330 feet from the west _____ line
 Section 16 Township 25S Range 35E NMPM Lea County NM

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: Change Pool <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.
 Endurance Resources LLC respectively requests pool change from ~~Doggie Draw, Delaware~~ to Jabalina, Delaware SW Pool Code 97597.

DEWEID
POOL WC-025-G05 5253523H;
DELAWARE

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 *M.A. Sirgo III* TITLE Engineer DATE 1/12/2016

Type or print name M.A. Sirgo, III E-mail address: manny@enduranceresourcesllc.com PHONE: 432-242-4680

For State Use Only

APPROVED BY: *[Signature]* TITLE Petroleum Engineer DATE 02/13/16
 Conditions of Approval (if any): _____

FEB 15 2016

[Handwritten mark]