

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 August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-005-60026
5. Indicate Type of Lease STATE XX FEE
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Twin Lakes San Andres Unit
8. Well Number #35
9. OGRID Number
10. Pool name or Wildcat Twin Lakes; San Andres (Assoc)

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 INJECTION

2. Name of Operator
State of New Mexico formerly Canyon E&P Company

3. Address of Operator
811 South 1st Street Artesia, NM 88210

HOBBS OCD
 FEB 16 2016
 RECEIVED

4. Well Location
 Unit Letter K: 1980 feet from the South line and 1980 feet from the West line
 Section 36 Township 8S Range 28E NMPM Chaves County Chaves

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

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENT PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/>	INT TO PA P&A NR P&A R	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A XX CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

SEE ATTACHED

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

SIGNATURE _____ TITLE _____ DATE _____

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only

APPROVED BY: Mark White TITLE Petroleum Engr. Specialist DATE 02/17/2016

Conditions of Approval (if any):

FEB 18 2016

m

Plugging Report TLSAU #35

2/3/2016 Worked on road and cleared location. Set rig mats and rigged up. Had to set temporary anchor on the Southwest corner of location.

2/4/2016 Installed BOP and moved in remaining equipment. Surface head had cement in the connections. Well was standing full of packer fluid and had 1 joint of tubing in the wellhead. RIH with gauge ring and tagged up at 2498'. Moved in workstring from the TLSA #119. RIH with perforated sub and bull plug. Tagged existing CIBP. Circulated MLF and tested casing. Casing tested good to 500#. Spotted 40 sx cement on top of CIBP. POOH and SION.

2/5/2016 Perforated 4 ½" casing @ 1000'. RIH with packer and set at 633'. Established rated and squeezed with 35 sx cement W/ CaCl. WOC and tagged at 838'. POOH to 506' and circulated cement to surface with 35 sx. Rigged down. Cut off wellhead and verified cement was to surface. Installed marker and cut off anchors. Emptied pit and cleared location.