

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. 30-025-21488
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Shackelford Oil Company		6. State Oil & Gas Lease No.
3. Address of Operator 203 W Wall St, Ste 200, Midland, TX 79701		7. Lease Name or Unit Agreement Name Lusk Federal #A-10
4. Well Location Unit Letter J : 1980 feet from the SOUTH line and 1980 feet from the EAST line Section 20 Township 19S Range 32E NMPM County Lea		8. Well Number A-10
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 20595
10. Pool name or Wildcat Lusk Delaware, West		

HOBBS OCD
 DEC 22 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: <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.

Due to recompletion in the Yates Formation, the well is no longer in the Lusk West Delaware Unit. Therefore, the name has been changed from the Lusk West Delaware Unit #10 to the Lusk Federal #A-10

Well Prior to Recompletion	Name	API	Lease
	Lusk West Delaware Unit #10	30-025-21488	NMLC065710-A
Well After Recompletion	Name	API	Lease
	Lusk Federal #A-10	30-025-21488	NMLC065710-A

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 TITLE CEO DATE 12/11/15
 Type or print name Brady Shackelford E-mail address: brady.shackelford@sbglobal.net PHONE: 432-682-9704
For State Use Only
 APPROVED BY: TITLE Petroleum Engineer DATE 03/14/16
 Conditions of Approval (if any):

MAR 14 2016