

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. 30-025-12066	/
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	/
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Rhodes Yates Unit	/
8. Well Number 011	/
9. OGRID Number 288774	/
10. Pool name or Wildcat RHODES; YATES-SEVEN RIVERS	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2988 DF	

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
PPC OPERATING COMPANY LLC

3. Address of Operator
1500 INDUSTRIAL BLVD., STE. 304; ABILENE, TX 79602

4. Well Location
 Unit Letter K : 2310 feet from the South line and 2310 feet from the West line
 Section 27 Township 26S Range 37E NMPM County LEA

HOBBS OGD
 MAR 31 2016
 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: MIT TESTING <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.

An MIT TEST WAS PERFORMED ON 03/16/2016 & WITNESSED BY CARL FLOWERS. TEST REPORT & CHART ATTACHED.

Spud Date: 03/29/1945 Rig Release Date: 04/19/1946

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

SIGNATURE Jana Spraberry TITLE OFFICE ADMINISTRATOR DATE 03/21/2016
 Type or print name JANA SPRABERRY E-mail address: jspraberry@plantationpetro.com PHONE: 325-267-6050

For State Use Only
 APPROVED BY: Bill Semanah TITLE Staff Manager DATE 4-1-16
 Conditions of Approval (if any):

APR 04 2016

CF
ey

BIG SPRING
INC.

0-1000
2 HOUR
GC GC-10615

1HR

2HR

Daves Tubing Testers
1000 #/60 min
Calibrated 7/2/15 TX

BS
4/1/16

Time 35 min.
Pure Flowed - OGD

Start
540#
525#

PPC Operating Company Inc
Rides Yates Unit # 11
K-5227-T 265-R 37E
30-025-12066

PRINTED IN U.S.A.