

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. 30-005-60658	✓
5. Indicate Type of Lease STATE FEE XX	✓
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Twin Lakes San Andres Unit	✓
8. Well Number 21	✓
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

4. Well Location
 Unit Letter C: 990 feet from the North line and 1650 feet from the West line
 Section 31 Township 8S Range 29E NMPM Chaves County

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 <u>PM X</u> 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.

HOBBS OCD

SEE ATTACHED

APR 12 2016

RECEIVED

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: Mah Whitson TITLE P.E.S. DATE 04-12-2016

Conditions of Approval (if any):

APR 14 2016

Handwritten initials

Plugging Report TLSAU #21

- 1/25/2016 Cleared road and location. Moved rig to location and spotted over the hole. Will rig up in the morning.
- 1/26/2016 Set 1 temporary anchor on the southwest corner. Dug out well head & rigged up. Struggled to get well head cap off. Installed BOP. Tubing and packer in the hole. Packer would go down the hole but not come up. Worked packer with no success. SION.
- 1/27/2016 Worked packer free. POOH with packer. RIH with CIBP and set at 2630'. Circulated MLF and tested casing. Casing tested good to 400#. Spotted 45 sx cement on top of CIBP. POOH with tubing and perforated 4 ½" casing at 1000'. Established rate and squeezed perms at 1000' with 35 sx cement. No circulation up annulus while pumping. SION
- 1/28/2016 Released packer and POOH. RIH with tubing and tagged cement at 842'. Laid down remaining tubing & perforated 4 ½" casing at 170'. Established circulation. Pumped cement down 4 ½" casing to perms at 170' and up annulus to surface. Took 55 sx cement. Rigged down. Cut off well head. Good cement to surface. Installed marker and cut off anchors.