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

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

Form C-103
Revised August 1, 2011

WELL API NO. 30-025-27487

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

HOBBS OCD
APR 27 2016
RECEIVED

7. Lease Name or Unit Agreement Name: Delmont Hatfield

1. Type of Well: Oil Well ☑ Gas Well ☐ Other

8. Well Number 1

2. Name of Operator: Kevin O. Butler & Associates, Inc.

9. OGRID Number 012627

3. Address of Operator: PO Box 1171Midland, TX 79702

10. Pool name or Wildcat

4. Well Location
Unit Letter J : 1980 feet from the South line and 1765 feet from the East line
Section 23 Township 16S Range 38E NMPM County Lea

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)* 3696' GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☒	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
DOWNHOLE COMMINGLE	☐						
OTHER:	☐			OTHER:	☐		

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.

Request Continuance of Temporary Abandonment
Per Maxey Brown, NMOCD will give a one year extension to TA

Condition of Approval: notify OCD Hobbs office 24 hours prior of running MIT Test & Chart

Spud Date: 09/05/1981 Rig Release Date:

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

SIGNATURE Lisa Builta TITLE Regulatory Compliance DATE 04/27/2016

Type or print name Lisa Builta E-mail address: Reports@kobutler.com PHONE: 432-682-1178

For State Use Only

APPROVED BY: Maxey Brown TITLE Dist Supervisor DATE 5/3/2016

Conditions of Approval (if any):

MAY 03 2016

CK