

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

**HOBBS OCD**  
**MAY 25 2016**  
**RECEIVED**

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		WELL API NO. 30-025-05204
2. Name of Operator Resolute Natural Resources Co., LLC		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 1700 Lincoln Street, Ste 2800, Denver, CO 80203		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>north</u> line and <u>2310</u> feet from the <u>east</u> line Section <u>36</u> Township <u>14S</u> Range <u>37E</u> NMPM <u>6</u> County <u>Lea</u>		7. Lease Name or Unit Agreement Name W T Mann A
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		8. Well Number <u>002</u>
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data E-PERMITTING <SWD <input type="checkbox"/> INJECTION <input checked="" type="checkbox"/> CONVERSION <input type="checkbox"/> RBDMS <input checked="" type="checkbox"/> RETURN TO <input type="checkbox"/> TA <input checked="" type="checkbox"/> CSNG <input type="checkbox"/> ENVIRO <input type="checkbox"/> CHG LOC <input type="checkbox"/> INT TO PA <input type="checkbox"/> P&A NR <input type="checkbox"/> P&A R <input type="checkbox"/> OTHER: <input type="checkbox"/>		9. OGRID Number <u>295770</u>
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. Resolute conducted an MIT test to extend the TA status on the subject well.		10. Pool name or Wildcat Devonian

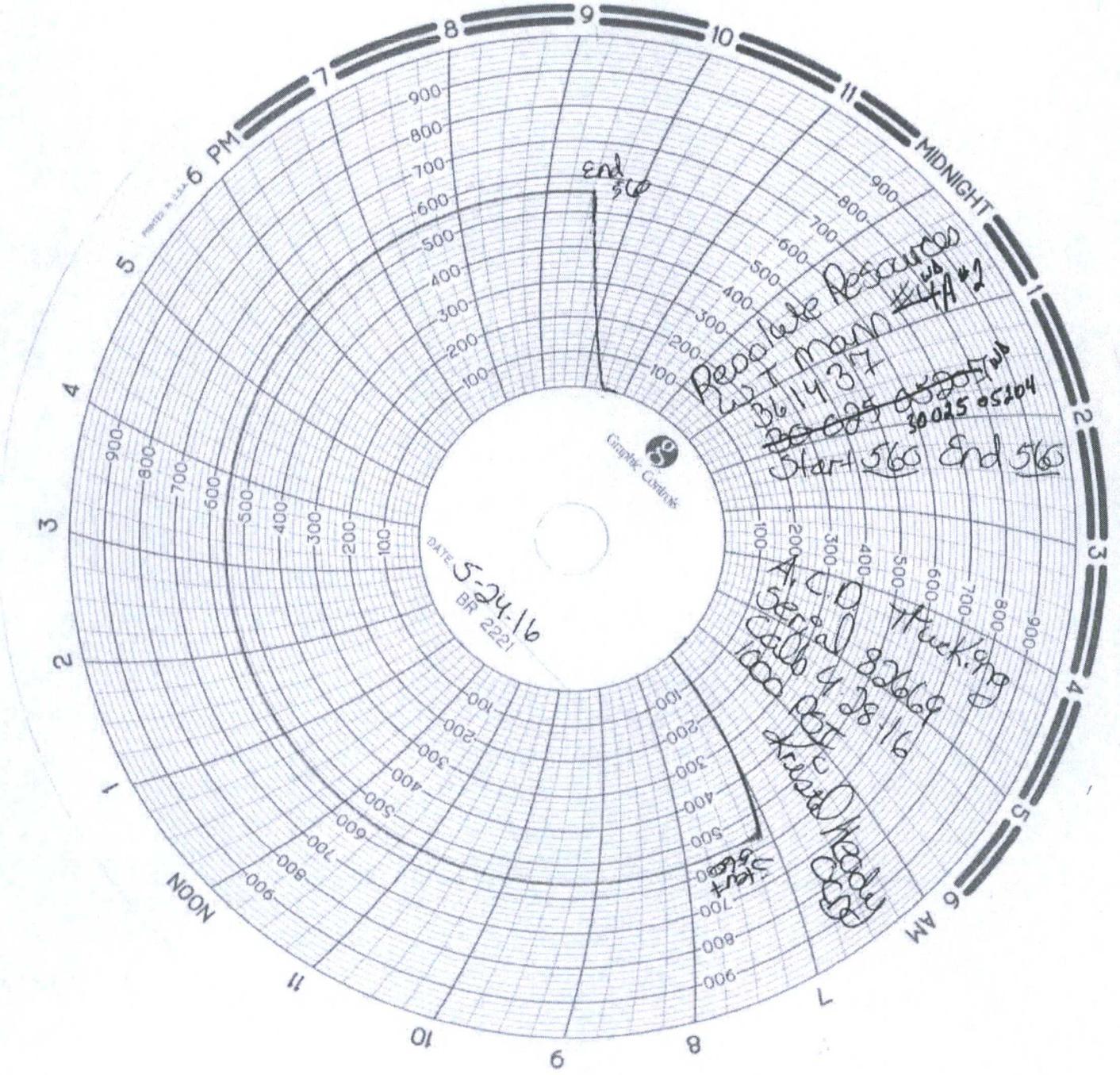
This Approval of Temporary Abandonment Expires 5/24/2019

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 Sherry Glass TITLE Sr Regulatory Analyst DATE 5-25-16  
 Type or print name Sherry Glass E-mail address: sglass@resoluteenergy.com PHONE: 303-573-4886  
**For State Use Only** X1580

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 5/25/2016  
 Conditions of Approval (if any):



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