

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-36987	✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	✓
6. State Oil & Gas Lease No. GT-1996	
7. Lease Name or Unit Agreement Name OPL 4 State	✓
8. Well Number #1	
9. OGRID Number 113315	
10. Pool name or Wildcat Lovington, Drinkard <i>WC-025 603 S173604P; Paddock</i>	✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3894'	

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 **HOBBS OCD**

2. Name of Operator
Texland Petroleum-Hobbs, LLC **JUN 03 2016**

3. Address of Operator
777 Main Street, Suite 3200, Fort Worth, Texas 76102 **RECEIVED**

4. Well Location
Unit Letter P : 440 feet from the South line and 440 feet from the East line
Section 4 Township 17S Range 36E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3894'

Pit or Below-grade Tank Application or Closure
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

E-PERMITTING <input type="checkbox"/> <u><SWD</u> <input type="checkbox"/> INJECTION <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
CONVERSION <input type="checkbox"/> RBDMS <u>MB</u>	
RETURN TO <input type="checkbox"/> TA <u>PM.</u>	
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: _____	OTHER: TA <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Texland Petroleum-Hobbs returned this well back to TA status as follows:

5/11/16 CIBP @ 6125' w/2 sks CI "C" cmt plug
Circ hole and pressure test to 500 psi/30 min; See attached chart.

This Approval of Temporary Abandonment Expires 5/11/2020

hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines x, a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Vickie Smith TITLE Regulatory Analyst DATE 06/3/16

Type or print name Vickie Smith E-mail address: vsmith@texpetro.com Telephone No. 575-433-8395

For State Use Only
APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 6/6/2016
Conditions of Approval (if any): _____

MB

HOBBS OCD
JUN 03 2016
RECEIVED

START

Graphic Controls LLC
(6.375 ARC LINE GRAD.)

01/11/16

MIN 6-8-1000-0-96MIN

Company: Texland Petroleum No: #1

Lease: ORL 4 State

Date of Test: 5-11-16 model: _____

Packer: make _____ 15 min _____ 30 min _____

Tubing Pressure: 0 min _____ 15 min 575 30 min 575

Casing Pressure: 0 min _____ 15 min _____ 30 min _____

Surf Csg Pressure: _____ 15 min _____ 30 min _____

1000 _____ 96 hr chart _____

Service Company: 1-h services

Driver/Supervision: Beto Rosas

Company Representative: _____

ARC Required: Y N

Witnessed by _____