

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

**HOBBS OGD**

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

JUN 23 2016

RECEIVED

WELL API NO. <b>30-025-32394</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>Federal</b>
7. Lease Name or Unit Agreement Name <b>Salado Brine Well</b>
8. Well Number <b>002</b>
9. OGRID Number <b>246368</b>
10. Pool name or Wildcat <b>BSW; Salado</b>

**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  Brine

2. Name of Operator  
**Basic Energy Services**

3. Address of Operator  
**801 Cherry St. Ste. 2100 Unit #21 Fort Worth, TX 76102**

4. Well Location  
 Unit Letter **A** : **1305** feet from the **North** line and **60** feet from the **East** line  
 Section **20** Township **25S** Range **37E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**GL 3073'**

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

<p><b>NOTICE OF INTE</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> F</p> <p>TEMPORARILY ABANDON <input type="checkbox"/> C</p> <p>PULL OR ALTER CASING <input type="checkbox"/> I</p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>CLOSED-LOOP SYSTEM <input type="checkbox"/></p> <p>OTHER: _____</p>	<p><b>INT TO PA</b></p> <p><b>P&amp;A NR</b> <u>fm.</u> ✓</p> <p><b>P&amp;A R</b> _____</p>	<p><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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.

6/8/16—Set CIBP @ 1050' Tag CIBP @ 1050', spot 190 sxs from 1050' to surface verify cmt RDMO.

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 Chris Romero TITLE \_\_\_\_\_ P&A Tech DATE 6/6/16

Type or print name Chris Romero E-mail address: \_\_\_\_\_ PHONE: 432-563-3355

**For State Use Only**

APPROVED BY: Maah White TITLE P.E.S. DATE 6/23/2016

Conditions of Approval (if any):