

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 OCD

JUN 30 2016

RECEIVED

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

WELL API NO. <b>30-025-22932</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>State 27</b>
8. Well Number <b>2</b>
9. OGRID Number <b>213190</b>
10. Pool name or Wildcat <b>Tulk Upper Penn</b> <i>SWD; PENN</i>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4150 GR'</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

2. Name of Operator **CrownQuest Operating**

3. Address of Operator **2129 PCR 2300, P.O. Box 53310, Midland, Tx 79710**

4. Well Location  
Unit Letter **P** : **660** feet from the **South** line and **660** feet from the **East** line  
Section **27** Township **14S** Range **32E** NMPM County **LEA**

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <b>Bradenhead Test</b>	<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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**Performed Bradenhead test on Injection Well. Results are attached.**

*LAST REPORTED PROD/INJ. 5/1/2015 (13 MONTHS)  
AUTHORITY TO INJECT TERMINATED  
Rule 19.15.26.12 C (1)  
M. Brown*

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 *Zachariah Jones* TITLE **Lease Manager IV** DATE **6/27/2016**

Type or print name **Zachariah Jones** E-mail address: **zjones@crowquest.com** PHONE: **432-288-4726**

**For State Use Only**

APPROVED BY: **Accepted for Record Only** DATE \_\_\_\_\_

Conditions of Approval (if any):

*M. Brown 6/30/2016*

*MB*

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

JUN 30 2016

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>Crown Quest Operating</i>	API Number <i>30 025 22932</i>
Property Name <i>State 27</i>	Well No. <i>2</i>

Surface Location

UL - Lot <i>P</i>	Section <i>27</i>	Township <i>14S</i>	Range <i>32E</i>	Feet from <i>660</i>	N/S Line <i>S</i>	Feet From <i>660</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR INJ	SWD	PRODUCER OIL	GAS	DATE <i>4-14-2016</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgg	(E)Tubing
Pressure	$\phi$	$\phi$	<i>N/A</i>	$\phi$	$\phi$
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 —
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR —
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS —
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood if
					applies.

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>RLC</i>	OIL CONSERVATION DIVISION
Printed name: <i>Reubin Collins</i>	Entered into RBDMS
Title: <i>Pumper</i>	Re-test
E-mail Address: <i>RLPS90@Leaco.net</i>	
Date: <i>4-14-2016</i>	Phone: <i>575-390-8728</i>
Witness: <i>[Signature]</i>	