

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

HOBBS OCD
OCT 11 2016
RECEIVED

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 July 18, 2013

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.)		WELL API NO. 30-025-21800
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD-558-A <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator 06 SWD, LLC		6. State Oil & Gas Lease No. NM 434
3. Address of Operator P.O Box 553 Lovington, NM 88260		7. Lease Name or Unit Agreement Name State AK SWD
4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>10</u> Township <u>11S</u> Range <u>NMPM</u> Lea County		8. Well Number 001
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4262 GL		9. OGRID Number 308397
10. Pool name or Wildcat SWD: Strawn		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <u>perforate</u> <input checked="" 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"/> OTHER: <input type="checkbox"/>	
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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.

1. move in rig up pulling unit, unset packer and pull tubing
2. run bit and tubing to clean perforations
3. rig up wireline perforate approximately 40 holes at 9,500-10,151 ft
4. re run packer and tubing, set packer within 100 ft of 9,129 ft, circulate packer fluid
5. rig down pulling unit, acidize with 2000 gallons of acid
6. Notify OCD 24 hours prior to running MIT
7. Pressure test
8. Return well to injection

*Packer Setting
 Depth - NO HIGHER
 THAN 9082'
 10/27/2016
 EXCEPTION LETTER.*

**Condition of Approval: notify
 OCD Hobbs office 24 hours**

prior of running MIT Test & Chart

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 Beatrice Skaggs TITLE Office manager DATE 10/11/16
 Type or print name Beatrice Skaggs E-mail address: acd@acd.oilfield PHONE: 575 390 8591
For State Use Only Mary Brown TITLE Dist. Supervisor DATE 10/12/2016
 APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 10/12/2016
 Conditions of Approval (if any):

MB