

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
HOBBS OCD
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
NOV 14 2016
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Form C-103
 May 27, 2004

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. 30-025-03137
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator PALADIN ENERGY CORP.		6. State Oil & Gas Lease No.
3. Address of Operator 10290 Monroe Drive, Suite 301, Dallas, Texas 75229		7. Lease Name or Unit Agreement Name Reeves 26
4. Well Location Unit Letter <u>K</u> : <u>1654</u> feet from the <u>South</u> line and <u>1654</u> feet from the <u>West</u> line Section <u>26</u> Township <u>18S</u> Range <u>35E</u> NMPM Lea County		8. Well Number <u>004</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3861'		9. OGRID Number 164070

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"/> OTHER: <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"/> OTHER: <u>Annual UIC chart</u> <input checked="" type="checkbox"/> <u>Deepen Devonian open hole section</u> <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

R/U Pump. Pressure up on annulus to 340 psi. Run Chart Test for 32 minutes. Ending pressure at 320 psi. See attached chart.

Administrative Order SWD-1092-A

Spud Date: 10/31/2016 Rig Release Date: 10/31/2016

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE David Plaisance TITLE V.P. DATE 11/8/2016

Type or print name David Plaisance E-mail address: dplaisance@paladinenergy.com PHONE: 214-654-0132 X4

For State Use Only

APPROVED BY: Gregory Bower TITLE Compliance Officer DATE 11/15/16

Conditions of Approval (if any): called office - made correction on UIC chart Test - gmb

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

NOV 07 2016

BRADENHEAD TEST REPORT

Operator Name <i>Receves</i>	API Number <i>30-025-03137</i>
Property Name <i>Receves 26</i>	Well No. <i>4</i>

7. Surface Location

UL Spot <i>R</i>	Section <i>26</i>	Township <i>18S</i>	Range <i>35E</i>	Feet from <i>1654</i>	N/S Line <i>S</i>	Feet From <i>1654</i>	E/W Line <i>W</i>	County <i>2CA</i>
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Well Status

<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> INJ	<input type="checkbox"/> SWD	<input type="checkbox"/> OIL	<input type="checkbox"/> PRODUCER	<input type="checkbox"/> GAS	DATE <i>10/31/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>A</i>			<i>A</i>	<i>A</i>
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:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>AMB</i>
Date: <i>10-31-16</i>	Phone:
Witness: <i>Kenny Zuber</i>	

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

10/31/16
BR 2221

Annual MTC
Risks
30-005-02674
K-26-18-557
Calib. DMC-05/57
511-185-81716
10004

SPARE-3104
end. 3204
30 min

John Brown - OCO

Stone

NOSSS OCO

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