

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
RECEIVED
 JAN 17 2017

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

WELL API NO. 30-025-26676
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. SWD-272
7. Lease Name or Unit Agreement Name West Jal SWD
8. Well Number 1
9. OGRID Number 161968
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 SWD

2. Name of Operator
MESQUITE SWD, INC

3. Address of Operator
PO BOX 1479, CARLSBAD NM, 88220

4. Well Location
 Unit Letter G : 1980 feet from the N line and 1980 feet from the E line
 Section 10 Township 25S Range 36E 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 checked="" 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: <input 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.

12/27/16- RU PULLING UNIT, NIPPLE UP BOP, RELEASE PACKER, TOH W/PKR
 12/28/16-TIH W/PKR, SET PKR @ 3598', CIRC PKR FLUID, FLANGE UP WELL HEAD
 12/29/16- RUN MIT WITNESSED BY KERRY FORTNER OCD, START 525# END 535# HELD FOR 32 MIN

Spud Date: Rig Release Date:

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

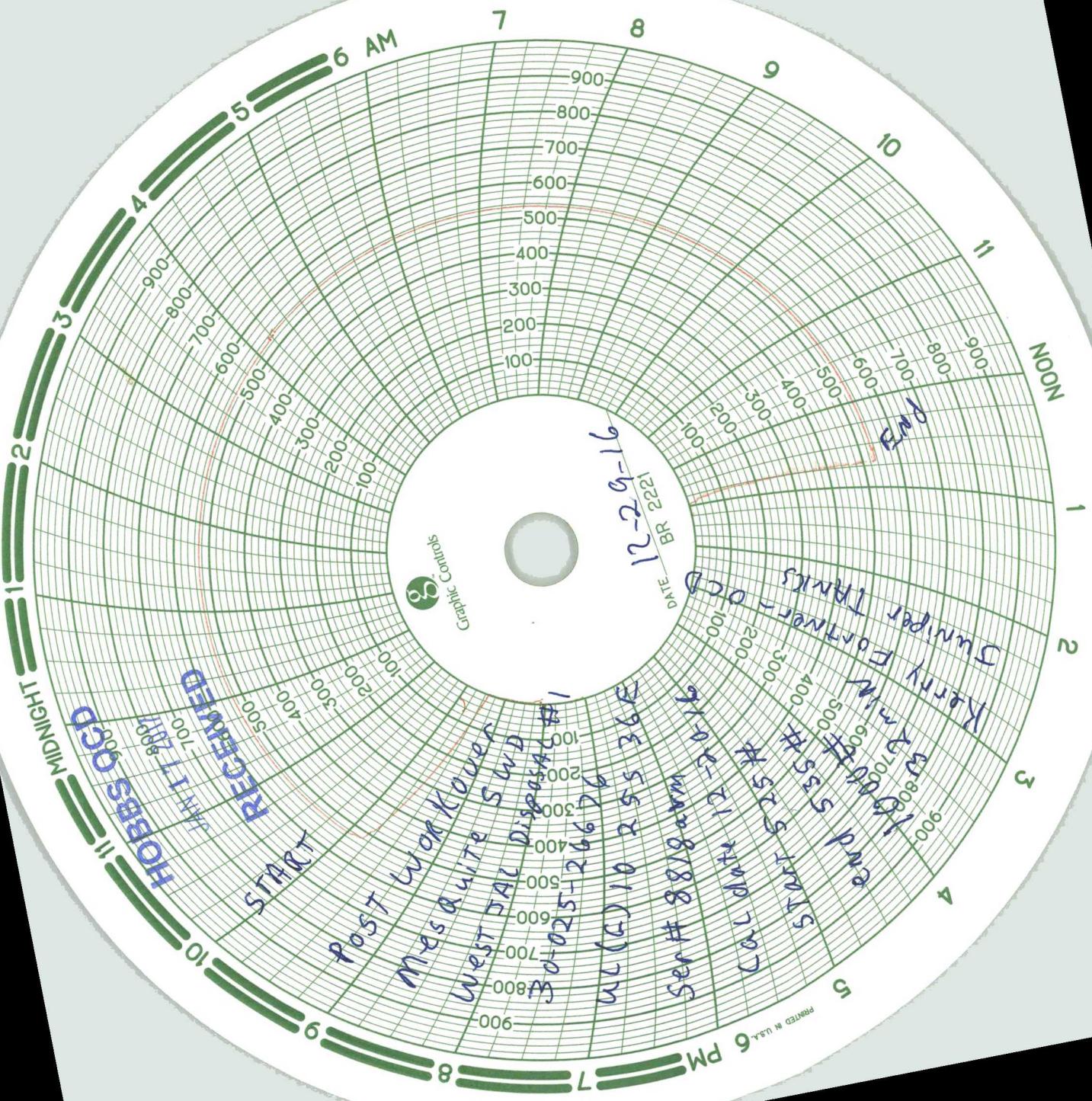
SIGNATURE TITLE Operations Manager DATE 1/10/17
 Type or print name Riley G. Neatherlin E-mail address: rneatherlin@gmail.com PHONE: 575-706-7288
For State Use Only
 APPROVED BY: TITLE AO/II DATE 1/18/2017
 Conditions of Approval (if any)

RBDMS - CHART - ✓

N



DATE 12-29-16
BR 222



HOBBS QCD
#HT 7-8999
RECEIVED

START

Post Work Koven
Mesa White SWD
West DAL Disposal #1
30-025-266 D6
WL(G) 10 255 36E
Ser# 8878atmm
date 12-29-16

STALS #555
STALS #555
Kerry Panner - QCD
Suniper Tanks
Kerry Panner
#58001
#57000
#56000
#55000

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