

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

**RECEIVED**  
**HOBBS OOD**  
**JAN 17 2017**

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

WELL API NO. 30-025-31226
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name McMillan
8. Well Number <del>24</del> -1
9. OGRID Number 20497
10. Pool name or Wildcat Northeast Pollack - Wolfcamp
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

2. Name of Operator  
Seely Oil Company

3. Address of Operator  
815 W. 10<sup>th</sup> Street, Fort Worth, TX 76102

4. Well Location  
 Unit Letter C: 400' feet from the North line and 1980' feet from the West line  
 Section 34 Township 14S Range 38E NMPM Lea County

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" 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: <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.

Well appears to have developed a casing leak. Propose to repair as follows:

1. Set RBP @ 8800' ±.
2. Squeeze in stages until a squeeze pressure is attained. TOH w/ tools.
3. TIH w/ bit, drill collars & tbg. Drill out cmt.
4. Test for 30 minutes. Swab down. TOH w/ bit.
5. TIH w/ tbg & on/off tools. Retrieve RBP. TOH.
6. TIH w/ production assembly.
7. Return well to production.

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 David L. Henderson TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Type or print name David L. Henderson E-mail address: dhenderson@seelyoil.com PHONE: 817-332-1377  
**For State Use Only**

APPROVED BY: Mary Brown TITLE AO/II DATE 1/18/2017  
 Conditions of Approval (if any): \_\_\_\_\_