

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

Form C-103
 Revised July 18, 2013

HOBBS
 JAN 23 2017
RECEIVED

WELL API NO. 30-025-27616
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> Fed <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Paduca SWD
8. Well Number #1
9. OGRID Number 161968
10. Pool name or Wildcat SWD; BELL CANYON-CHERRY CAN
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
P.O. Box 12579 Carlsbad NM 88221

4. Well Location
 Unit Letter H : feet from the 1980 FNL line and 660 feet from the FEL line
 Section 22 Township 25S Range 32E NMPM County Law

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: Post workover MIT <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.

1-11-17 performed post work over MIT. Witnessed by Kerry Frontier
 Start 560 #
 End 565 #
 Held 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 Riley G Neatterlin TITLE operations Manager DATE 1-23-17

Type or print name Riley G Neatterlin E-mail address: Rgneatterlin@gmail.com PHONE: 575-766-7288

APPROVED BY: Maryjo Brown TITLE Dist. Supervisor DATE 1/23/2017

Conditions of Approval (if any):

RBDMS-CHAOT - ✓

60 0

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POSTMAN (M) 1115
 Me Sawite SWD
 Paducah SWD #1
 30-025-2746
 25-5 BR E
 UC(H) 22
 Sent 265-0312/3
 Cal date 1-11-17

HOBBE
 JAN 23 2017
 RECEIVED



CHART NO. MC MP-1000-IHR

METER _____

TAKEN OFF _____

CHART PUT ON _____

LOCATION _____

REMARKS 1-12-17

1000#
 500#
 500#
 End 565#
 32 min
 Kerry Fortner - OCD

Juniper TANKS

STEVEN DEY

END

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