

REC'D AUG 20 2017

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

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

WELL ID NO. 30-025-20463
5. Indicate Type of Lease STATE [X] FEE []
6. State Oil & Gas Lease No. 96121
7. Lease Name or Unit Agreement Name State A A/C 1
8. Well Number 101
9. OGRID Number 370767
10. Pool name or Wildcat SWD, San Andres

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 [X] Other []
2. Name of Operator Blackbeard Operating, LLC.
3. Address of Operator 201 W Wall St. Midland, TX 79701
4. Well Location Unit Letter M : 660 feet from the SOUTH line and 660 feet from the WEST line
Section 11 Township 23S Range 36E NMPM County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK [] PLUG AND ABANDON []
TEMPORARILY ABANDON [] CHANGE PLANS []
PULL OR ALTER CASING [] MULTIPLE COMPL []
DOWNHOLE COMMINGLE []
CLOSED-LOOP SYSTEM []
OTHER: [X]

SUBSEQUENT REPORT OF:

- REMEDIAL WORK [] ALTERING CASING []
COMMENCE DRILLING OPNS. [] P AND A []
CASING/CEMENT JOB []
OTHER: [X]

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.

May 31st; Annual MIT Test

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

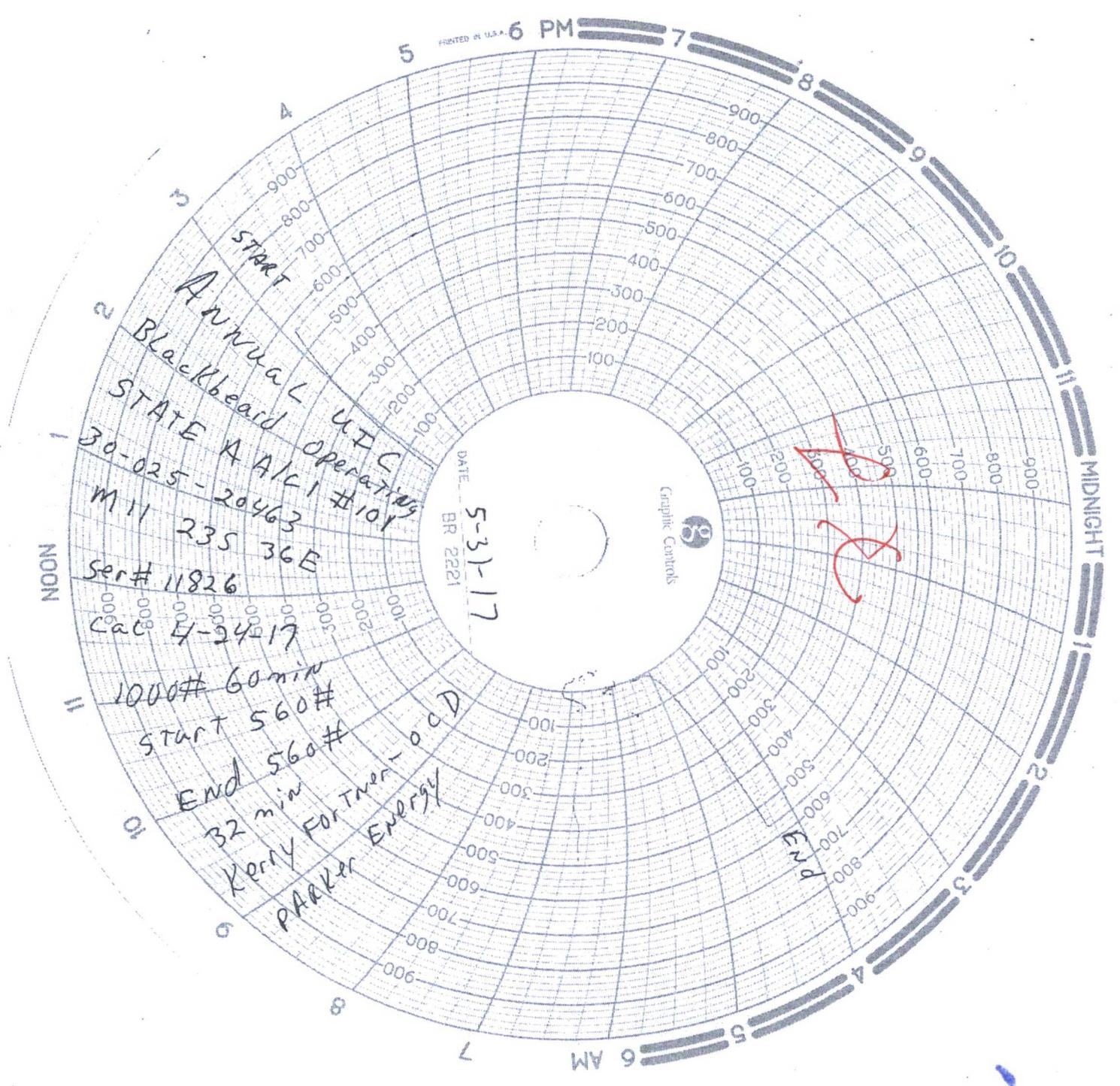
[Empty box for Rig Release Date]

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

SIGNATURE [Signature] TITLE ENGINEER DATE 8/15/2017

Type or print name IAN SMITH E-mail address: ismith@blackbeardoperating.com PHONE:

APPROVED BY: Kerry Fother TITLE Compliance Officer DATE 8-18-17
Conditions of Approval (if any):



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Graphic Controls

DATE 5-31-17
BR 2221

START
Annual UIC
Blackbeard Operating
STATE R AIC #101
30-025-20463
M11 235 36E
Ser# 11826
Cat 4-24-17

1000# 60min
START 560#
END 560#
32 min
Kerry Fortner
Parker Energy

END

END

NOON

MIDNIGHT

7 6 AM 5 4 3 2 1

2

1

11

10

9

8

7

6 AM

5

4

3

2

1

MIDNIGHT

10

9

8

7

6 PM

5

4

3

2

1

NOON