

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
HOBBS Office of Minerals and Natural Resources
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

SEP 29 2017
 RECEIVED

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. 30-025-42652
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator MURCHISON OIL & GAS, INC.		6. State Oil & Gas Lease No.
3. Address of Operator 7250 DALLAS PARKWAY, STE. 1400, PLANO, TX 75024		7. Lease Name or Unit Agreement Name JACKSON UNIT
4. Well Location Unit Letter <u>O</u> : <u>200</u> feet from the <u>SOUTH</u> line and <u>1640</u> feet from the <u>EAST</u> line Section <u>21</u> Township <u>24S</u> Range <u>33E</u> NMPM LEA County		8. Well Number 030H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3532 GR		9. OGRID Number 15363
10. Pool name or Wildcat TRIPLE X; BONE SPRING, WEST		

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"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: Request for TA Extension <input checked="" 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: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

The Temporary Abandonment Status for this well expired on 4/27/17. We hereby request permission to re-test and apply for TA extension through 4/27/18.

**Condition of Approval: notify
 OCD Hobbs office 24 hours
 prior of running MIT Test & Chart**

Spud Date: 08/17/2015 Rig Release Date: 09/15/2015

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

SIGNATURE [Signature] TITLE Vice President Operations DATE 9/25/17

Type or print name: Gary Cooper E-mail address: rcooper@jdmii.com PHONE: 972-931-0700
For State Use Only

APPROVED BY: [Signature] TITLE AD/II DATE 9/25/2017
 Conditions of Approval (if any):

MB