

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88241
 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
HOBBS OCD
 OIL CONSERVATION DIVISION
 220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

WELL API NO. 30-025-03555
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 317624
7. Lease Name or Unit Agreement Name FOX A STATE
8. Well Number 002
9. OGRID Number 371115
10. Pool name or Wildcat LOVING <i>Allison; SAN ANDRES, SOUTH#</i>

RECEIVED
 OCT 05 2017

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
ROCKCLIFF OPERATING NEW MEXICO LLC

3. Address of Operator
1301 MCKINNEY; STE 1300; HOUSTON, TX 77010

4. Well Location
 Unit Letter **H** : **1980** feet from the **N** line and **660** feet from the **E** line
 Section **02** Township **09S** 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:		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 checked="" 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 is on OCD inactive list. Rockcliff Operating NM LLC requests TA status for 12 months until a more economic climate exists for recompletion.

Proposed TA Procedure:

1. Pull Rods / Tubing from well
2. Tag cement / CIBP @ 9,600ft, Circ hole w/ FW + biocide & corrosion inhib
3. Set 5.5in CIBP @ 4,830ft (Within 100ft of uppermost perf)
4. Tag 5.5in CIBP, Circ hole w/ FW + biocide & corrosion inhib
5. Spot 25 sxs @ 4,830ft-4,730ft, WOC 4hrs, Tag cmt
6. Circ hole w/ FW + biocide & corrosion inhib
7. Psi test to 500psi for 30mins, ~~BLM~~ **OCD** must witness and OK

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

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 Jamie A. Robinson TITLE SR REGULATORY ANALYST DATE 10/05/17

Type or print name JAMIE A. ROBINSON E-mail address: JROBINSON@ROCKCLIFFENERGY.COM PHONE: 713-351-0534

For State Use Only
 APPROVED BY: Mary Brown TITLE AO/II DATE 10/5/2017
 Conditions of Approval (if any):