

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

HOBBS OCD  
 SEP 25 2017  
 RECEIVED

WELL API NO. <u>30-025-34070</u>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <u>VB-2914-0000</u>
7. Lease Name or Unit Agreement Name <u>STATE 16</u>
8. Well Number <u>1Y</u>
9. OGRID Number <u>21566</u>
10. Pool name or Wildcat <u>West Sawyer Devonian</u>
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  
John R. Stearns, dba Stearns

3. Address of Operator  
HC65 Box 900, Crossroads, NM. 88114

4. Well Location  
 Unit Letter P : 330 feet from the South line and 940 feet from the EAST line  
 Section 16 Township 9S Range 37E NMPM County Lea

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 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: <u>Return Well to Devonian Prod</u>	

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) - Pickup work string and drill out BP @ 11,523' - (06/23/17)
- 2) - Drill out second BP @ 11,854' - (07/25/17)
- 3) - Rig down Reverse Unit
- 4) - Set packer @ 11,862' 2 7/8" Tubing @ 11862
- 5) - Set Anchor Rod Pump @ 2,000' - Return to production (9-12-17) ✓

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: John R. Stearns TITLE: owner/operator DATE: 9-22-2017

Type or print name: John R. Stearns E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_

**For State Use Only**  
 APPROVED BY: Mary Brown TITLE: AO/IT DATE: 10/4/2017  
 Conditions of Approval (if any): \_\_\_\_\_