Submit 1 Copy To Appropriate District HOBBS OCTOP of New Mexico Office District I – (575) 393-6161 I 625 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 SUNDRY NOTICES AND REPORTS ON WELLS	Form C-103 Revised July 18, 2013 WELL APL NO. 30-0/5-234493 5. Indicate Type of Lease STATE FEE 5 6. State Oil & Gas Lease No.
(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 Injection	BKE 8. Well Number #1
2. Name of Operator	9. OGRID Number 19797
Key Energy Services LLC 3. Address of Operator	10. Pool name or Wildcat
1301 McKinney St., Houston, TX 77010 4. Well Location	
Unit Letter <u>H</u> : 2310 feet from the <u>North</u> line and <u>860</u> feet from the <u>East</u> line	
Section 13 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County
11. Elevation (Snow 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 IN PLUG AND ABANDON IN TEMPORARILY ABANDON IN CHANGE PLANS IN COMMENCE DRILLING OPNS. PAND A ALTERING CASING INCLESSING INCLESSING INCLESSING INCLESSING/CEMENT JOB PULL OR ALTER CASING IN MULTIPLE COMPL INCLUSED-LOOP SYSTEM INCLESSING INCLESSING/CEMENT JOB PAND A 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. Reason for Work: Re-enter to perform well clean out. Requesting start date of November 6, 2017.	
Clean well out w/ coil tubing & then acidize perforations C.O.A. If the or Packer Is Released for any	
OCD DISTRICT IL Office 24 hours Prior to schedule chart test. mil	
TRIDE TO SCHEADE C	Man I Con Map
Spud Date: Nov 6, 2017 Rig Release Date: 5WD-495.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Richy John TITLE ARea Director DATE 11/3/2017	
Type or print name <u>Rickey Noles</u> E-mail address: <u>Inolevi & Key energy</u> PHONE: <u>903</u> <u>937</u> <u>0442</u> <u>For State Use Only</u> APPROVED BY: <u>August Mounte</u> <u>AO/II</u> DATE <u>11/6/2017</u> Conditions of Approval (if any):	

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