

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

HOSES OGD  
 NOV 20 2017  
 RECEIVED

WELL API NO. 30-025-31957	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	/
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Ellen Sims	/
8. Well Number 9	/
9. OGRID Number 269184	/
10. Pool name or Wildcat West Blinebry	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) KB-3343'	

**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  
Ernmar Investments, Inc. /

3. Address of Operator  
P.O. Box 6492, Edmond, OK 73083-6492

4. Well Location  
 Unit Letter B 990 feet from the North line and 1651 feet from the East line  
 Section 3 Township 23S Range 37E NMPM County Lea

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

<p style="text-align: center;"><b>NOTICE OF INTENTION TO:</b></p> <p>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: <input type="checkbox"/></p>	<p style="text-align: center;"><b>SUBSEQUENT REPORT OF:</b></p> <p>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 checked="" type="checkbox"/>          Perf &amp; Stimulate Add't Pay</p>
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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.

1. MI rig on 8/9/17.
2. Clean out 5 1/2" csg to 6650' & circ'd hole clean w/ treated wtr.
3. TOH & LD tools.
4. RU wireline & perforated 6441'- 43', 6486'- 88', 6531'- 33', 6540'- 42'. & 6548'- 52' for a total of 17 holes.
5. TIH w/ pkr on 2 7/8" tbg & set pkr @ 6363'.
6. Acidize & frac perms 6441'- 6552' w/ 1500 gals 15% acid, 12,000 gals gelled wtr + 12,000# 20/40 sd.
7. TOH w/ pkr.
8. TIH w/ bit & cleaned out sd fill to 6588'.
9. TIH w/ pkr on 2 7/8" tbg & set @ 5709'.
10. TIH w/ 2 1/16" tbg to 6407'.
11. TIH w/ pump on 3/4" rods.
12. Move rig out & returned well to production 9-11-17.

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 E. L. Buttross TITLE President DATE 11/16/17

Type or print name E. L. Buttross E-mail address: ernie@ernmar.com PHONE: 405-478-754

**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 11/22/17

Conditions of Approval (if any):