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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

025

Form C-103
Revised July 18, 2013

	WELL API NO. 30-~~0125~~-31343
	5. Indicate Type of Lease STATE ☒ FEE ☐
	6. State Oil & Gas Lease No. V-2522
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.)	7. Lease Name or Unit Agreement Name FOX "A" STATE
1. Type of Well: Oil Well ☐ Gas Well ☒ Other INJ	8. Well Number 5
2. Name of Operator ROCKCLIFF OPERATING NEW MEXICO LLC	9. OGRID Number 371115
3. Address of Operator 1301 MCKINNEY; STE 1300; HOUSTON, TX 77010	10. Pool name or Wildcat ALLISON PENN

4. Well Location
Unit Letter F :2310 feet from the NORTH line and 2070 feet from the WEST line
Section 2 Township 9S Range 36E NMPM LEA 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	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
DOWNHOLE COMMINGLE	☐						
CLOSED-LOOP SYSTEM	☐						
OTHER:	☐			OTHER: MIT			☒

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.

PERFORM MIT 10/19/2017

HOBBS OCD
JAN 3 2018
RECEIVED

~~HOBBS OCD
JAN 1 2018
RECEIVED~~

Spud Date: 08/07/91

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. REG. ANALYST DATE 01/03/18
Type or print name JAMIE A. ROBINSON E-mail address: JROBINSON@ROCKCLIFFENERGY.COM PHONE: 713-351-0534

For State Use Only

APPROVED BY: Gary Robinson TITLE Compliance Officer DATE 1-3-18
Conditions of Approval (if any):