

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
 FEB 12 2018
 RECEIVED

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> SWD		WELL API NO. 30-025-28468
2. Name of Operator Basic Energy Services		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 801 Cherry St. Ste. 2100 Fort Worth TX, 76102		6. State Oil & Gas Lease No. VA-928
4. Well Location Unit Letter <u>E</u> : <u>1980</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line Section <u>7</u> Township <u>19S</u> Range <u>36E</u> NMPM County <u>Lea</u>		7. Lease Name or Unit Agreement Name State NO
		8. Well Number 1
		9. OGRID Number 246368
		10. Pool name or Wildcat SWD Delaware
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 PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	INT TO PA P&A NR <u>PM</u> P&A R _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

- 1/26/18—MIRU.
- 1/29/18—Tag existing CIBP @ 6332' cap w/ 25 sxs CTOC @ 6085' SIW.
- 1/30/18—Tag @ 6113' pressure test (did not hold) OCD ok'd to look for holes..
- 1/31/18—Find hole @ 5460'-5525' OCD ok'd to spot 25 sxs @ 5525'.
- 2/01/18—Spot 25 sxs @ 5525' CTOC @ 5271' Tag @ 5255', perf @ 4190' set pkr @ 3900' press up OCD ok'd to spot 25 sxs @ 4225' CTOC @ 3971'.
- 2/02/18—Tag @ 4001' perf @ 3138' press up OCD ok'd to spot 25 sxs @ 3126' CTOC @ 2866' WOC Tag @ 2863'.
- 2/05/18—Spot 25 sxs @ 1820' CTOC @ 1566', PUH to 500' spot 55 sxs from 500' to surface verified RDMO.

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.
 Restoration Due By 02-04-2019

Spud Date: Rig Release D:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE TITLE P&A Tech DATE 2/6/18

Type or print name Chris Romero E-mail address: _____ PHONE: 432-563-3355

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer DATE 2-12-18
 Conditions of Approval (if any): _____