

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

WELL API NO. 30-025-42733
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WILDHOG BWX STATE COM
8. Well Number 1H
9. OGRID Number 307600
10. Pool name or Wildcat JAL WOLFCAMP
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2,943' GR

**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 IMPETRO OPERATING LLC

3. Address of Operator 300 E. SONTERRA BLVD., SUITE 1220  
SAN ANTONIO, TX 78258

4. Well Location  
 Unit Letter C : 199 feet from the N line and 1979 feet from the W line  
 Section 20 Township 26S Range 36E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
2,943' GR

**HOBBS OCD**  
**FEB 28 2018**  
**RECEIVED**

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 checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>	INITIAL COMPLETION <input type="checkbox"/>	OTHER: <input type="checkbox"/>	

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.

Casing was set 6/18/2017  
 Cementing 6/19/2017  
 Casing Test Information - Test Casing to 11,500 lbs. psi for 30 min. Held ok - 6/30/2017

DRILL 17 1/2" HOLE TO 1,832'. RUN & CMT 13 3/8" CSG. - 04-26-2017 pressure tested 13 3/8" csg. to 903# for 30 min., held 1075 sks 65/35/6 Premium Plus, 405 sks Premium Plus T.O.C. @ Surface

DRILL 12 1/4" HOLE TO 5,158'. RUN & CMT 10 3/4" CSG. - 05-01-2017 pressure tested 10 3/4" csg. to 1,500# for 30 min., held 790 sks Premium Plus 50/50 Poz, 110 sks Premium Plus T.O.C. @ Surface

DRILL 9 7/8" HOLE TO 12,470'. RUN & CMT 7 5/8" CSG. - 05-27-2017 pressure tested 7 5/8" csg. to 1,500# for 30 min., held 1220 Premium 50/50 Poz, 170 sks Premium T.O.C. @ 4,750 (Calc)

DRILL 6 3/4" HOLE TO 17,244'. RUN & CMT 5 1/2" X 5" CSG. - 06-30-2017 pressure tested 5 1/2" x 5" csg. to 11,500# for 30 min., held 585 sks Premium 50/50 T.O.C. @ 10617 (Calc)

Rig Release @ 6:00 on 06/19/2017

Spud Date: 09/01/2015

Rig Release Date: 06/19/2017

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

SIGNATURE Debbie Cherry TITLE REG. ASST. DATE 03/01/2018

Type or print name DEBBIE CHERRY E-mail address: debbiec@impetrooperating.com PHONE: 210-999-5400 Ext. 11

**For State Use Only**  
 APPROVED BY: Jaren Sharp TITLE Staff Mgr DATE 3-1-18  
 Conditions of Approval (if any):