

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88241
 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
HOBBS OCD
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

APR 11 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.)		WELL API NO. 30-025-28010
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Foundation Energy Management LLC		6. State Oil & Gas Lease No. 305993
3. Address of Operator 5057 Keller Springs Rd Suite 650, Addison TX. 75001		7. Lease Name or Unit Agreement Name Superior WA State
4. Well Location Unit Letter _____ : 660 feet from the South line and 660 feet from the west line Section 11 Township 14S Range 33 E NMPM County Lea		8. Well Number #1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4206 GL		9. OGRID Number 370740
10. Pool name or Wildcat Upper Penn		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" 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"/>		SUBSEQUENT REPORT OF: 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 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.

Rig up. Pull All rods and tubing out of well. Run CIBP on wireline.
 Set CIBP 50' above top perforations on t.w.l. TOP perf is at 9878', v
 Dump bag 35' of cement on CIBP. NUWH. Load casings and tubing with
 2% KCL. Pressure test to 500# for 30 minutes. Fill out follow up TA forms.
 Note: NMOCDD will be notified 48hrs prior to MIT to be witnessed
 Plan to begin work 4/19/18.

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 Homer Madden TITLE OPS Superintendent DATE 4-10-18

Type or print name Homer Madden E-mail address: hmadden@foundationenergy.com PHONE: 918-526-5580

APPROVED BY: Majeed Brown TITLE AO/II DATE 4/11/2018
 Conditions of Approval (if any):