

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
HOBBS OCD
 OIL CONSERVATION DIVISION
 100 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 June 19, 2008

APR 26 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. 30-025-00036
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 JAY MANAGEMENT COMPANY, LLC		6. State Oil & Gas Lease No. K-2654
3. Address of Operator 1001 WEST LOOP SOUTH, SUITE 750 HOUSTON, TX 77027		7. Lease Name or Unit Agreement Name NEW MEXICO "B"
4. Well Location Unit Letter <u>A</u> : <u>323</u> feet from the <u>NORTH</u> line and <u>1007'</u> feet from the <u>EAST</u> line Section <u>27</u> Township <u>10S</u> Range <u>32E</u> NMPM County <u>LEA</u>		8. Well Number <u>2</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4265' GR		9. OGRID Number 247692
10. Pool name or Wildcat MESCALERO PERMO 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 type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <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"/>		OTHER: <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

04/23/2018 Rigged up WOR. 0 psi on casing. NU BOP. PU with 2-7/8" tubing for a total of 159jts. Secured well and SDFN.

04/24/2018 0 psi on tubing. 0 psi on casing. ND BOP RU WLU and Spot 100' class H cmt on CIBP at 5200'. SET CIBP at 4310' RD WLU. NU BOP. RIH with 130jts of 2-7/8" tubing. ND BOP. OCD Rep (Kerry Fortner) on location RU kill truck for Mechanical Integrity test. Try to pressure up to 500 pound. Communication between surface casing and production casing. RD kill truck. Secured well. RDMO WOR. Repair Due 07/28/2018 approve by OCD.

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 Clayton Griffin TITLE District Manager DATE 04/26/2018

Type or print name Clay Griffin E-mail address: cgriffin@aymgt.com PHONE: 574-707-5691

For State Use Only

APPROVED BY: Mary Brown TITLE AO/II DATE 4/26/2018
 Conditions of Approval (if any):