

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

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. 30-025-44470
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 AMEREDEV OPERATING, LLC		6. State Oil & Gas Lease No. 320762
3. Address of Operator 5707 SOUTHWEST PARKWAY, BUILDING 1, STE. 275 AUSTIN, TX 78735		7. Lease Name or Unit Agreement Name RED BUD 25 36 32 STATE COM
4. Well Location Unit Letter <u>O</u> : <u>200</u> feet from the <u>SOUTH</u> line and <u>2250</u> feet from the <u>EAST</u> line Section <u>32</u> Township <u>25S</u> Range <u>36E</u> NMPM LEA County		8. Well Number 105H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3002' GL		9. OGRID Number 372224
10. Pool name or Wildcat JAL; WOLFCAMP, WEST		

HOBBBS OCD
 JUN 08 2018
 RECEIVED

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"/> 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 checked="" 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.

05/22/2018 - Ran 33 jts. 13 3/8"54.5# J-55 BTC casing.

05/22/2018 - Pump 20 bbl gel Spacer. 20 bbl. Fw. Lead 900 Sk 1.69 cuft/sk 13.5 ppg (277 bbl.)Class C cmt. Tail 200 sk 1.34 cuft/sk 14.8 ppg (48 bbl) Class C cement. Displaced w/ 187 bbl. FW bumped plug 500 psi over. Held 5 min. bled back 1 bbl. Floats held. No returns 159 bbl into displacemt returned 5 bbl then lost again. Plug down @ 5:00 am 5/22/18 Notified State of New Mexico.

05/22/2018 - Run Temperature Survey

05/23/2018 - 1" Cement to Surface with 550 SKS Class C+ 2% Calcium, 14.8 ppg with 1.32 yield, Circulate 5 bbls to surface, Rig down cement Equipment. Postpone Operations to Spud Adjacent Well

06/02/2018 - Test Casing to 1500 psi for 30 minutes. Test Good.

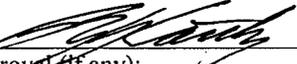
Spud Date: Rig Release Date:

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

SIGNATURE  TITLE Operations Superintendent DATE 6/4/2018

Type or print name Zachary Boyd E-mail address: zboyd@ameredev.com PHONE: 737-300-4700

For State Use Only Petroleum Engineer

APPROVED BY:  TITLE _____ DATE 06/09/18
 Conditions of Approval (if any): _____