

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. 30-025-30029
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 type="checkbox"/> FEE <input checked="" type="checkbox"/> /
2. Name of Operator Dakota Resources Inc. (I)		6. State Oil & Gas Lease No.
3. Address of Operator 4914 N. Midkiff Rd, Midland, TX 79705		7. Lease Name or Unit Agreement Name Melissa
4. Well Location Unit Letter O : 660 feet from the South line and 1980 feet from the East line Section 34 Township 14S Range 35E NMPM County Lea		8. Well Number 001
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3998 GR		9. OGRID Number 5691
10. Pool name or Wildcat Morton Wolfcamp East		

JUN 11 2018
 RECEIVED

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

4/16/18

Set CIBP @10,230' and dumped 6 sks cement on top. Re-perforate existing perms at 1 JSPF 10,129-10,139, 10,166-10,171 & 10,176-10,184. Acidized well with 8000 Gal 20% gelled acid @ 4.2 BPM. Over displace acid w/ 80 BBL FW. Swab test. Run in hole with tubing, rods and pump. Put well on production.

? @ 10,220 per CM

Provide tubing detail

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 Chris M. Morphew TITLE President DATE 6/7/18

Type or print name Chris M Morphew E-mail address: chrism@dakotares.com PHONE 432-697-3420

For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 6-12-18

Conditions of Approval (if any):