

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. 30-025-44229
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 Azalea 26 36 28 State
8. Well Number 121Y
9. OGRID Number 372224
10. Pool name or Wildcat WC-025 G-09 S263619C; UPR Wolfcamp

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM HOBS-001) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Ameredev Operating, LLC

3. Address of Operator
5707 Southwest Parkway, Building 1, Suite 275 Austin, TX 78735

4. Well Location
 Unit Letter D : 231 feet from the North line and 240 feet from the West line
 Section 28 Township 26S Range 36E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2918' GL

HOBS-001
 JUN 15 2018
 RECEIVED

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

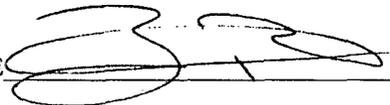
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE 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 checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <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.

2/2/18 - Cement 5 1/2" casing with. 60 bbls. Mud push spacer. Followed by 2,555 sx. (578 bbls.) 50/50 P/H+5%PF44 (BWOW), (Salt), + 2% PF20 (Bentonite Gelo+0.5% PF606 (Fluid Loss) +0.2% PF013 (Retarder). Mixed at 14.4 # 1.25 Yield. Displaced with 290 bbls. 10# Brine + 142 bbls. of fresh water. Bumped plug with 2,700 psi took up to 3,200 psi. Float held bled back 3.5 bbls.

Spud Date: 11/30/17 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 Supervisor DATE 2/2/18

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

For State Use Only

APPROVED BY:  TITLE Petroleum Engineer DATE 06/15/18
 Conditions of Approval (if any):