

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

HOBBS OGD  
 JUN 28 2018  
 RECEIVED

|   |  |   |
|---|--|---|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)              |  | WELL API NO.<br>30-025-34090 ✓  |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>  |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>ENERGYQUEST II, LLC ✓  |  | 6. State Oil & Gas Lease No.<br>B-2148  |
| 3. Address of Operator<br>4526 RESEARCH FOREST DR., SUITE 200<br>THE WOODLANDS, TX 77381  |  | 7. Lease Name or Unit Agreement Name<br>Shahara State Unit ✓  |
| 4. Well Location<br>Unit Letter <u>F</u> : <u>1335</u> feet from the <u>North</u> line and <u>1335</u> feet from the <u>West</u> line<br>Section <u>16</u> Township <u>17S</u> Range <u>33E</u> NMPM Lea County ✓ |  | 8. Well Number<br>9 ✓   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4193 GR   |  | 9. OGRID Number<br><del>143119</del> 305911 ✓   |
|   |  | 10. Pool name or Wildcat<br>Maljamar Grayburg San Andres ✓  |

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: <u>Return to production</u> <input checked="" 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.

- MIRU pulling unit.
- Pull completion assembly.
- Repair failed components.
- Change pump.
- Rig down pulling unit.
- Return to production.

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 Debra Moore TITLE Production Analyst DATE 06/25/2018

Type or print name Debra Moore E-mail address: debra.moore@energyquest.us PHONE: 281-875-6200

**For State Use Only**

APPROVED BY: Aren Sharp TITLE Staff Mgr DATE 6-28-18

Conditions of Approval (if any):