

Submit 1 Copy To Appropriate District Office

**HOBBS OCD** State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88249  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87412  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

JUL 11 2018  
RECEIVED

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.) 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> 2. Name of Operator Special Energy Corporation 3. Address of Operator P.O. Drawer 369, Stillwater, OK 74076		WELL API NO. 30-025-07190 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name Henry A Harris 8. Well Number 04 9. OGRID Number 138008 10. Pool name or Wildcat Gladiola, Devonian
4. Well Location Unit Letter <u>G</u> : <u>1980</u> feet from the <u>north</u> line and <u>1980</u> feet from the <u>east</u> line Section <u>18</u> Township <u>12S</u> Range <u>38E</u> NMPM <u>6</u> County <u>Lea</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3870 GL		

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 checked="" 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: <u>MIT for TA Status</u> <input checked="" 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 checked="" 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.

Special Energy requests a continuation of the TA status of the Henry A Harris #4, as it has not produced since October, 2007. Attached are copies of the mechanical integrity test chart and the Bradenhead Test Report performed 6/13/18.

This Approval of Temporary Abandonment Expires 6/13/2020

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 Don Terry TITLE Operations Manager/Engineer DATE 6/15/2018  
 Type or print name Don Terry E-mail address: don.terry@specialenergycorp.com PHONE: 405-377-1177

For State Use Only  
 APPROVED BY: Maley Brown TITLE AO/I DATE 7/11/2018  
 Conditions of Approval (if any):

RRMS - CHART - ✓

MB

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DATE 6-13-18  
MCI P 0-1000-8-IHR

Graphic Controls  
16,376 APC LINE GRAD.

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Special Energy  
Henry A Harris #4

30-015-0796-00-02

G 18-125-38E

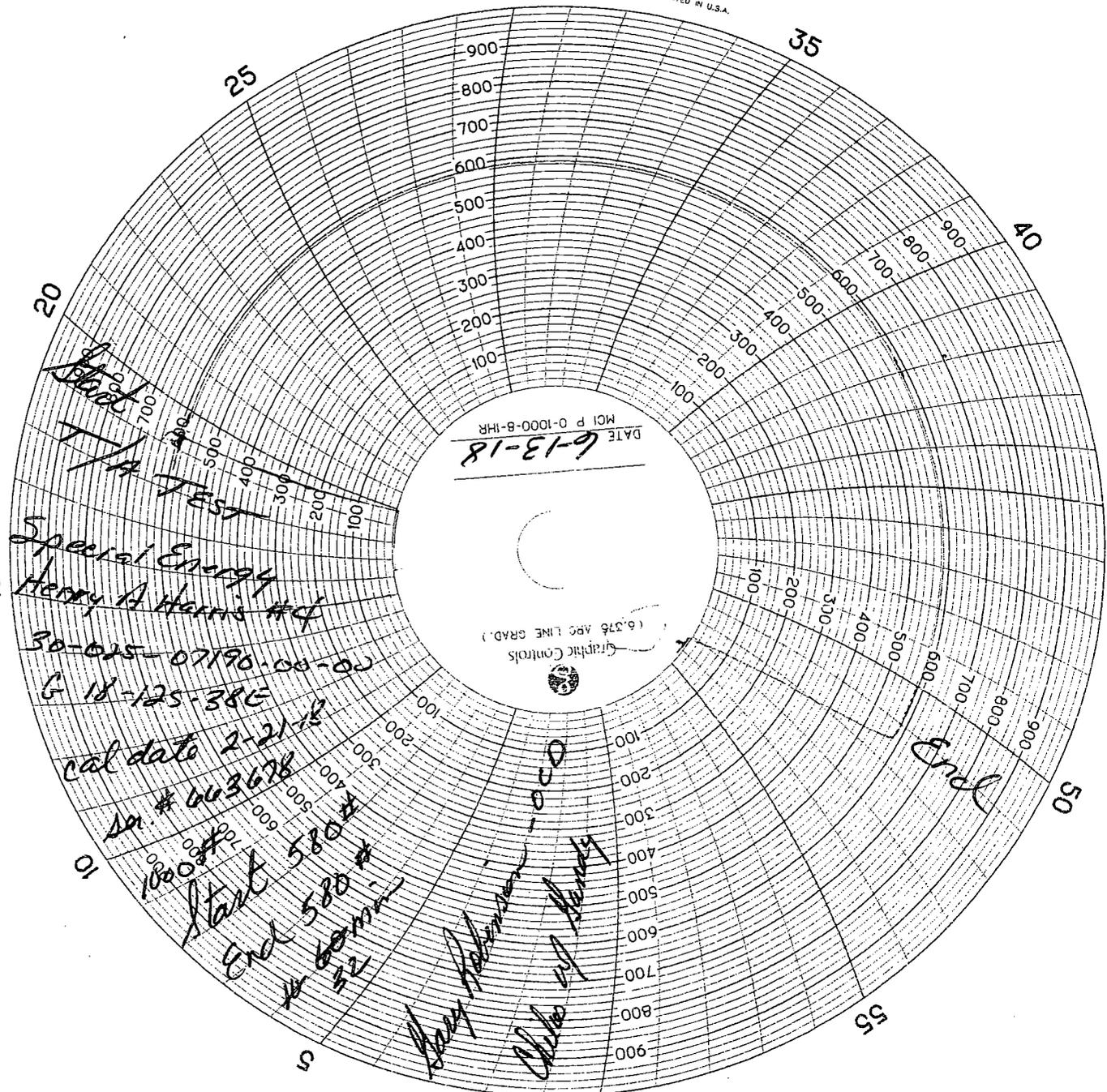
cal date 2-21-18

ser # 603678

Start  
End  
# 60mi  
52

Ray Robinson  
Chick up hand

End



State of New Mexico  
 Energy, Minerals and Natural Resources Department  
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Special Energy</i>		API Number <i>30-025-07190</i> ✓
Property Name <i>Henry A Harris</i>		Well No. <i>#4</i> ✓

Surface Location

UL - Lot <i>G</i>	Section <i>18</i>	Township <i>12S</i>	Range <i>38E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>E</i>	County <i>LEA</i> ✓
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Well Status

TA'D WELL <input checked="" type="radio"/> YES	NO	SHUT-IN <input checked="" type="radio"/> YES	NO	INJ	INJECTOR SWD	PRODUCER <input checked="" type="radio"/> OIL	GAS	DATE <i>6-13-18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>N/A</i>	<i>0</i>	<i>NONE</i>
Flow Characteristics					
Pull	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	CO2 —
Steady Flow	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	WTR —
Surges	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	GAS — ✓
Down to nothing	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Type of Fluid
Gas or Oil	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Injected for
Water	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test <i>GR</i>
E-mail Address:	
Date:	Phone:
Witness: <i>Shery Robinson</i>	
	<i>575-399-3220</i>

INSTRUCTIONS ON BACK OF THIS FORM