

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

**HOBBS OCD**  
**AUG 08 2018**  
**RECEIVED**

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-025-12070 ✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WH Rhodes B Federal NCT 1 ✓
8. Well Number 9 ✓
9. OGRID Number 371698 ✓
10. Pool name or Wildcat Rhodes Yates Seven Rivers
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2980 GL

**SUBMIT 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  Gas Well  Other

2. Name of Operator  
HPPC, Inc. ✓

3. Address of Operator  
306 West Wall Suite 209; Midland, TX 79701

4. Well Location  
 Unit Letter P : 660 feet from the South line and 660 feet from the East line  
 Section 27 Township 26S Range 37E NMPM Rhodes Field County Lea ✓

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: MIT TEST <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.

-Ran MIT test with Kerry Fortner from OCD as witness on July 11, 2018. The well failed the MIT test. We believe there is a tubing leak. Plan: Sending rig to location once available (9/1/2018); rig up and pull out of hole with packer and tubing and test tubing in the hole. Replace any joints that do not test; Circulate packer fluid, Set Packer and Run MIT test.

**Condition of Approval: notify**

**OCD Hobbs office 24 hours**

**prior of running MIT Test & Chart**

Spud Date: 7/31/1943

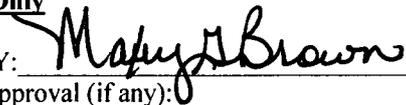
Rig Release Date: 8/26/1943

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

SIGNATURE  TITLE Vice President DATE 8/03/2018

Type or print name Rajan Prasad E-mail address: rajan.prasad@hppcinc.com PHONE: 432-557-5067

**For State Use Only**

APPROVED BY:  TITLE AO/I DATE 8/13/2018

Conditions of Approval (if any):

✓