

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

HOBBBS  
 AUG 20 2018  
 RECEIVED

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.)		WELLS API NO. 30-041-00131 Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other - Injection <input type="checkbox"/>		6. State Oil & Gas Lease No.
2. Name of Operator EOR Operating Company, Inc.		7. Lease Name or Unit Agreement Name Milnesand SA Unit
3. Address of Operator 777 N. Eldridge Parkway, Suite 150, Houston, TX 77079		8. Well Number 182
4. Well Location Unit Letter <u>D</u> : <u>660'</u> feet from the <u>North</u> line and <u>660'</u> feet from the <u>South</u> line Section <u>18</u> Township <u>8S</u> Range <u>35E</u> NMPM <u>Roosevelt</u> County <u>WEST</u>		9. OGRID Number 257420
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		10. Pool name or Wildcat Milnesand-San Andres

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input 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: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input checked="" type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input 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.

8/7/18 Hooked up vacuum truck to csg. RU, unset 4 1/2" packer, NU BOP, laid down 6"x2 1/16" sub and 10"x2 1/16" sub. TOH with 137 jts. 2 1/16" laid down 1 bad jt. With hole and 4 1/2" packer, closed BOP and SD. 8/8/18 Hooked up vacuum truck to csg, opened BOP, bled well down. Testers show up with wrong tools, waited 6 hours for testers. RU, testers PU new 4 1/2" packer, tested 136 jts 2 1/16" tbg in hole, PU 1 new jt., 2 1/16" tbg to replace bad jt. All tbg tested good @ 5000#, closed BOP, rig down testers and vacuum truck, SD. 8/9/18 RU vacuum truck to tbg. RU kill truck to csg., circulated 70 bbls packer fluid around, ND BOP, set packer @ 15 jts., flange well up. Hook up chart recorder, psi up to 400 psi. Held 400psi for 35 min. RD kill truck and vacuum truck, returned well to production. RD, cleaned location, moved to next well.

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 [Signature] TITLE Office Manager DATE 08/17/18

Type or print name Lauri M. Stanfield E-mail address: lstanfield@hunteroil.com PHONE: 832-485-8522

**For State Use Only**  
 APPROVED BY: [Signature] TITLE Compliance Supervisor DATE 8/20/18  
 Conditions of Approval (if any):

*tbg + pkv @ 4501' perfs 4543-4620*

