

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

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD HOBBS OCD		WELL API NO. 30-025-42448
2. Name of Operator OWL SWD OPERATING, LLC		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 8214 Westchester Drive, Ste 850, Dallas, TX 75255		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>N: 433</u> feet from the <u>SOUTH</u> line and <u>1970</u> feet from the <u>WEST</u> line Section <u>14</u> Township <u>24 S</u> Range <u>34 E</u> NMPM County <u>LEA</u>		7. Lease Name or Unit Agreement Name MADERA SWD
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3464' GR		8. Well Number #1 9. OGRID Number 308339
10. Pool name or Wildcat SWD; DEVONIAN (96101)		

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 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"/>		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 checked="" 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.

6/27/2015 - Surface Casing...
 WIPER TRIP IN HOLE, NO ISSUES; SERVICE RIG AND TOP DRIVE
 CIRCULATE BOTTOMS UP AND SPOT LCM PILL ON BOTTOM.
 TRIP OUT OF HOLE AND LAY DOWN PONY COLLAR AND 1- 8" DC.
 SAFETY MEETING WITH BULL ROGERS AND R/U AND RUN 25 JOINTS OF 16" 84#
 CASING, SET AT 1005.'
 R/U 16" PUMP IN SWEDGE AND CIRCULATE CAPACITY OF CASING 218 BBLS.
 SAFETY MEETING WITH ALLIED AND R/U IRON, PUMP 625 SKS CLASS C PREMIUM
 PLUS CMT LEAD, MIX AND PUMP 395 SKS OF CLASS C PREMIUM PLUS CEMENT,
 DROP PLUG AND DISPLACE @ 6 BPM, BUMP PLUG WITH 202 BBLS, 500 PSI OVER,
 RELEASE PRESURE, FLOATS HELD, 1 BBL BACK, 102 BBLS CMT TO SURFACE 13.2 PPG
 WAIT ON CEMENT

Submitted to complete well file documentation on 8/24/2018

Spud Date: 6/23/2015 Rig Release Date: 2/22/2016

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

SIGNATURE [Signature] TITLE Agent for Owl DATE 8/24/18

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only
 APPROVED BY: [Signature] TITLE AO/I DATE 8/28/2018

Conditions of Approval (if any): **Accepted for Record Only**