

Submit 3 Copies To Appropriate District Office

State of New Mexico

Form C-103

District I  
1625 N. French Dr., Hobbs, NM 88240

HOBBS

Energy, Minerals and Natural Resources

June 19, 2008

District II  
1301 W. Grand Ave., Artesia, NM 88210

OCT 30 2018

CONSERVATION DIVISION

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

1220 South St. Francis Dr.

District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

RECEIVED

Santa Fe, NM 87505

WELL API NO. 30-025-29110
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FBE <input type="checkbox"/>
6. State Oil & Gas Lease No. 024643
7. Lease Name or Unit Agreement Name Townsend State Com
8. Well Number 1
9. OGRID Number 247692
10. Pool name or Wildcat Edison Mississippian
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4006' GR

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  Gas Well  Other

2. Name of Operator  
JAY MANAGEMENT COMPANY, LLC

3. Address of Operator  
1001 WEST LOOP SOUTH, SUITE 750 HOUSTON, TX 77027

4. Well Location  
Unit Letter J : 3806 feet from the North line and 2193 feet from the East line  
Section 3 Township 16S Range 35E NMPM County LEA

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- DOWNHOLE COMMINGLE
- PLUG AND ABANDON
- CHANGE PLANS
- MULTIPLE COMPL

SUBSEQUENT REPORT OF:

- REMEDIAL WORK
- COMMENCE DRILLING OPNS
- CASING/CEMENT JOB
- ALTERING CASING
- P AND A

OTHER:

OTHER:

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

C.D.A. Temporarily abandon well to evaluate upper zone.

SET CIBP WITHIN 100'  
OF TOP PERF. CAP W/ 35'  
CMT IF BY WIRE LINE OR  
25 x 25 CMT BY TBG.  
LOAD WITH INHIBITED FLUID.

Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of running MIT Test & Chart

PROVIDE CURRENT WELLBORE  
DIAGRAM.

Spud Date:

Rig Release Date:

WITH SUBSEQUENT C-103

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

SIGNATURE Clayton Griffin TITLE District Manager DATE 10/30/2018

Type or print name Clay Griffin E-mail address: cgriffin@jaymgt.com PHONE: 574-707-5691

For State Use Only

APPROVED BY: Mary Brown TITLE AO/I DATE 10/30/2018

Conditions of Approval (if any):