

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

HOBBES
 NOV 01 2018
 RECEIVED

| | |
|---|---------------------------------|
| WELL API NO. | 30-025-41347 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> | |
| 6. State Oil & Gas Lease No. | VB-2136, VB-2137 |
| 7. Lease Name or Unit Agreement Name | Merchant Livestock 24 State Com |
| 8. Well Number | 2H |
| 9. OGRID Number | 372165 |
| 10. Pool name or Wildcat | Ojo Chiso, Bone Spring South |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | 3476' GR |

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK 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
Centennial Resource Production, LLC

3. Address of Operator
1001 17th Street, Suite 1800, Denver, CO 80202

4. Well Location
 Unit Letter N : 40 feet from the South line and 1700 feet from the West line
 Section 24 Township 22S Range 34E NMPM County Lea

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

| | | | |
|--|---|--|--|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| 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: <u>Installed tubing</u> | <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.

2/7/18 RIH w/327 jts 2.875 L80, 6.5# tbg Set @ 10,741' and 25 - 150 RHBC pump.

Spud Date: 11/19/13 Rig Release Date: 12/29/13

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

SIGNATURE K.C. TITLE Sr. Regulatory Analyst DATE 10/30/18

Type or print name Kanicia Castillo E-mail address: kanicia.castillo@cdevinc.com PHONE: 720-499-1537
For State Use Only Petroleum Engineer

APPROVED BY: [Signature] TITLE [Signature] DATE 11/02/18
 Conditions of Approval (if any):