

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

DEC 14 2018

WELL API NO. 30-025-44618
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5898
7. Lease Name or Unit Agreement Name Bell Lake Unit South
8. Well Number 330H
9. OGRID Number 12361
10. Pool name or Wildcat Bell Lake; Bone Spring, South
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3602 GR

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG 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
Kaiser-Francis Oil Company

3. Address of Operator
P. O. Box 21468, Tulsa, OK 74121-1468

4. Well Location
 Unit Letter I : 2130 feet from the South line and 620 feet from the East line
 Section 6 Township 24S Range 34E NMPM Lea County

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>Completion</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.

Completion began 8/13/18 Completion finished 11/16/18

- MIRU WL.
- TCP'd first stage @ 19236 - 19356. Broke down perms.
- Stage frac'd lateral 11870 - 19356 in 42 stages with 440228 bbls fluid + 20719495# sd.
- Drilled out plugs & cleaned out lateral to PBDT w/coiled tbg. Flowed well back.

Spud Date: 5/6/18 Rig Release Date: 7/3/18

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

SIGNATURE Jan Valkenburg TITLE Mgr., Regulatory Compliance DATE 12/13/18

Type or print name Charlotte Van Valkenburg E-mail address: Charlotv@kfoc.net PHONE: 918-491-4314

For State Use Only
 APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 12-18-18
 Conditions of Approval (if any):