

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

WELL API NO. <b>30-025-45028</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>RED HILLS SWD</b>
8. Well Number <b>1</b>
9. OGRID Number <b>161968</b>
10. Pool name or Wildcat <b>[97803] SWD; DEVONIAN-MONTOYA</b>

**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 **SWD**

2. Name of Operator  
**MESQUITE SWD, INC.**

3. Address of Operator  
**PO BOX 1479  
CARLSBAD NM 88220**

4. Well Location  
 Unit Letter **H** ; **1500** feet from the **NORTH** line and **430** feet from the **EAST** line  
 Section **5** Township **26S** Range **33E** NMPM **LEA** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3360' GR**

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: <b>MIT TEST</b> <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.

12/20/2018 – Pressure test to 560# for 30 minutes. Test not witnessed, but ok to proceed per George Bower.

MIT chart attached.  
 Original will follow my mail.

REC'D  
 DEC 28 2018  
 RECEIVED

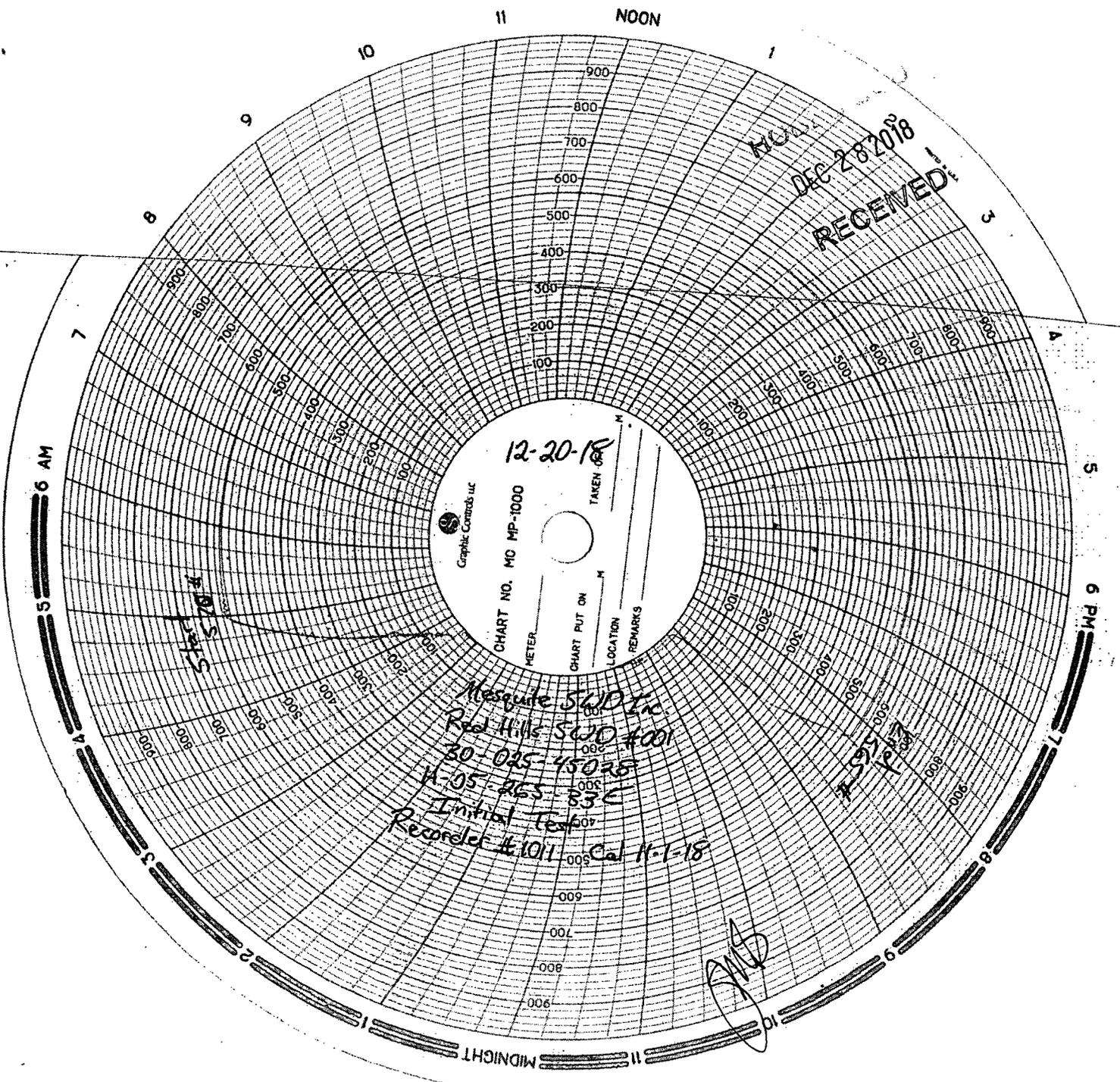
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Melanie J. Wilson TITLE Regulatory Analyst DATE 12/28/2018

Type or print name Melanie J. Wilson E-mail address: mjpl692@gmail.com PHONE: 575-914-1461

**For State Use Only**

APPROVED BY: George Bower TITLE Compliance Supervisor DATE 12/31/18  
 Conditions of Approval (if any):



NOV  
 DEC 28 2018  
 RECEIVED



12-20-18

CHART NO. MC MP-1000  
 METER \_\_\_\_\_  
 CHART PUT ON \_\_\_\_\_  
 LOCATION \_\_\_\_\_  
 REMARKS \_\_\_\_\_  
 TAKEN ON \_\_\_\_\_

Mesquite SWD Inc  
 Red Hills SWD #001  
 30-025-45025  
 H-05-265  
 Initial Test  
 Recorder #1011 Cal 11-1-18

*[Handwritten signature]*