

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  
 OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

**HOBBS OCD**  
**RECEIVED**  
 JAN 11 2019

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.)		WELL API NO. <b>30-025-31075</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>Fuifer oil + Cattle Co. LLC</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>PO BOX 1227 JAI NM 88252</b>		7. Lease Name or Unit Agreement Name <b>Red Cloud</b>
4. Well Location Unit Letter <b>0</b> : <b>660</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line Section <b>3</b> Township <b>25 S</b> Range <b>37 E</b> NMPM County <b>lea</b>		8. Well Number <b>3</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3127 GR</b>		9. OGRID Number <b>141402</b>
		10. Pool name or Wildcat <b>JAI mat TANS: II, Yates, TRV5</b>

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 checked="" 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: <input 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.

**1-9-2019 = Finish Repair TANK, Flow line, + motor on unit,  
 we Tested well 24HRS  
 4-Barrels oil, 1-Barrel Water, GAS TSTM at present time.  
 RTS. 1-10-2019.**

Spud Date: **12-5-90**

Rig Release Date: **12-13-90**

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

SIGNATURE Mike Dennis TITLE Production Superintendent DATE 1-11-2019

Type or print name Mike Dennis E-mail address: MDENNIS3082@Gmail.com PHONE: 432 940 1890

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 01/19/19  
 Conditions of Approval (if any):

