

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

HOBBS OCD
RECEIVED
 JAN 18 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. 30-025-41716
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator BC Operating, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 50820 Midland, TX 79710		7. Lease Name or Unit Agreement Name Weissbeir 23
4. Well Location Unit Letter P : 265 feet from the South line and 1300 feet from the East line Sectional 14 Township 17S Range 37E NMPM. County Lea		8. Well Number. 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number. 160825
10. Pool name or Wildcat Hobbs Channel; Bone Spring		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <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.

- 9/05/18—MIRU Tag existing CIBP @ 8650'.
- 9/06/18—Circ well w/ MLF spot 35 sxs H @ 8560' CTOC @ 8427' SIW.
- 9/07/18—Tag @ 8418' spot 25 sxs C @ 6483' TOC @ 6325', spot 70 sxs @ 5767' TOC @ 5324' WOC Tag @ 5330' SIW.
- 9/10/18—Spot 25 sxs @ 3585' TOC @ 3427' perf @ 2344' set pkr @ 1964', collar split lost 24 jts & pkr OCD ok'd to leave in hole.
- 9/11/18—RIH w/ pkr to 997' pressure up OCD ok'd to spot 30 sxs @ 2400' TOC @ 2210' WOC Tag @ 2244', perf @ 450' pressure up OCD ok'd to perf @ 100' and attempt sqz SIW.
- 9/12/18—Perf @ 100' set pkr @ 45' had circulation, OCD ok'd to RIH to 500' spot 80 sxs TOC 100', spot 40 sxs from 90' to surface verified RDMO.

Spud Date: Rig Release Date:

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

SIGNATURE *Chris Romero* TITLE Agent DATE 9/13/18

Type or print name Chris Romero E-mail address: _____ PHONE: 432-563-3355
For State Use Only

APPROVED BY: *Kerry Fortner* TITLE Compliance Officer A DATE 1-22-19
 Conditions of Approval (if any): _____