

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 August 1, 2011

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

HOBBS OGD
RECEIVED
APR 24 2019

WELL API NO. 30-005-21104
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NEW MEXICO BX STATE
8. Well Number 8
9. OGRID Number 190595
10. Pool name or Wildcat CHAVEROO SA

SUNDRY NOTICES AND REPORTS ON WEI
 (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 PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
ENDEAVORENERGY RESOURCES, LP

3. Address of Operator
110 N. MARIENFELD, STE 200 MIDLAND, TX 79701

4. Well Location
 Unit Letter N; 860' feet from the SOUTH line and 2230 feet from the WEST line
 Section 16 Township 8S Range 33E NMPM CHAVES County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4383' GL

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"/> 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"/>
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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.

02/22/19-NOTIFIED NMOCD.
 02/25/19-MIRU.
 02/26/19-TAGGED CIBP/CMT@4107'. CIRCULATED MLF. PERFD@2425'. COULD NOT EIR@1500#. RECEIVED APPROVAL FROM NMOCD-KERRY AND SPOTTED 25SX FROM 2475'-2275'. WOC&TAGGED@2236'. PERFD@2065'. COULD NOT EIR@1500#.
 02/27/19-RECEIVED APPROVAL FROM NMOCD-KERRY AND SPOTTED 25SX FROM 2115'-1915'. WOC&TAGGED@1876'. PERFD@475'. SQUEEZED 25SX FROM 475'-375'. WOC&TAGGED@362'. SPOTTED 10SX FROM 30'-SURFACE. VERIFIED CEMENT AT SURFACE.

CUTOFF WELLHEAD, ANCHORS 4' BELOW SURFACE AND INSTALL DRYHOLE MARKER. TURN OVER FOR RECLAMATION.

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 [Signature] TITLE SR REGULATORY ANALYST DATE 03/29/19

Type or print name JAN SOUTH E-mail address: JSOUTH@EERONLINE.COM PHONE: (432)687-1575

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 4-25-19
 Conditions of Approval (if any):