

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
 Santa Fe, NM 87505

HOBBS OGD
APR 10 2019
RECEIVED

WELL API NO. 30-025-37612
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 Adobe State
8. Well Number 5
9. OGRID Number 258350
10. Pool name or Wildcat Eunice; San Andres, Southwest
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,393' GL

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-103) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
VANGUARD OPERATING, LLC

3. Address of Operator
5847 SAN FELIPE, STE. 3000, HOUSTON, TEXAS, 77057

4. Well Location
 Unit Letter L : 1,650 feet from the SOUTH line and 990 feet from the WEST line
 Section 17 Township 22S Range 37E NMPM County Lea

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

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: Temporary Abandon (TA) and Conduct MIT <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.

Vanguard Operating, LLC has temporarily abandoned this well. A CIBP was set @ 3,698' and capped with 35' of cmt with a bailer. (top perf @ 3,748'). An MIT was performed on 03/11/2019. Rick Rickman with OCD was present during the MIT. The casing was pressure tested to 580 psig and held for 30 minutes. A copy of the chart is attached to this sundry. Well TA'd.

This Approval of TA EXPIRES: 3/11/22
FINAL TA STATUS EXTENSION -
 Well needs to be PLUGGED or RETURNED to PRODUCTION
 BY THE DATE STATED ABOVE: X 7

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 Operations Engineer DATE 03/28/2019

Type or print name Kyle Zimmermann E-mail address: kzimmerman@vnreenergy.com PHONE: 432-202-0145
For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 4-22-19
 Conditions of Approval (if any):

HOBBS OCD

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

APR 10 2019

BRADENHEAD TEST REPORT

RECEIVED

Operator Name VANGUARD OPERATING, LLC		API Number 30-025-37612-00-00
Property Name ADOBE STATE		Well No. 005

⁷ Surface Location

UL - Lot L	Section 17	Township 22-S	Range 37-E	Feet from 1650	N/S Line S	Feet From 990	E/W Line W	County LEA
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Well Status

TA'D Well <input checked="" type="radio"/> YES <input type="radio"/> NO	SHUT-IN <input checked="" type="radio"/> YES <input type="radio"/> NO	INJECTOR INJ SWD	PRODUCER <input checked="" type="radio"/> OIL <input type="radio"/> GAS	DATE 3/11/19
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OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Flow Characteristics					
Puff	<input checked="" type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input checked="" type="checkbox"/> Y/N	CO2 _____
Steady Flow	<input checked="" type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input checked="" type="checkbox"/> Y/N	WIR _____
Surges	<input checked="" type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input checked="" type="checkbox"/> Y/N	GAS _____
Down to nothing	<input checked="" type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input checked="" type="checkbox"/> Y/N	If applicable type
Gas or Oil	<input checked="" type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input checked="" type="checkbox"/> Y/N	fluid injected for
Water	<input checked="" type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input type="checkbox"/> Y/N	<input checked="" type="checkbox"/> Y/N	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test KF
E-mail Address:	
Date: 10/10/18 3-11-19	Phone:
Witness: Rick Rickman	

