

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

**HOBBS OGD**  
**APR 12 2019**  
**RECEIVED**

WELL API NO.	30-025-44693
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	E-5999
7. Lease Name or Unit Agreement Name	Bell Lake Unit North
8. Well Number	401H
9. OGRID Number	12361
10. Pool name or Wildcat	Ojo Chiso; Wolfcamp, SW
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3518' GR

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG 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  
 Kaiser-Francis Oil Company

3. Address of Operator  
 P. O. Box 21468, Tulsa, OK 74121-1468

4. Well Location  
 Unit Letter E : 2100 feet from the North line and 325 feet from the West line  
 Section 1 Township 23S Range 33E NMPM Lea County

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: <u>Casing detail</u> <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.

- 11/9/18 10 3/4", 40.5#, J55 set @ 1215' & cmt'd w/770 sxs. TOC @ surface. Pressure tested to 1500#.
- 11/17/18 7 5/8", 29.7#, P110 set @ 11150' & cmt'd w/1075 sxs. TOC @ 4777'. Pressure tested to 2440#. DV tool set @ 4777' & cmt'd w/665 sxs. TOC @ surface.
- 12/26/18 5 1/2", 20#, P110 set @ 20098' & cmt'd w/1365 sxs. TOC @ surface. Pressure tested to 11,000#.

Spud Date: 11/7/18 Rig Release Date: 12/27/18

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

SIGNATURE: Charlotte Van Valkenburg TITLE: Mgr., Regulatory Compliance DATE: 4/11/19

Type or print name Charlotte Van Valkenburg E-mail address: Charlotv@kfoc.net PHONE: 918-491-4314

APPROVED BY: Karen Sharp TITLE: Staff Mgr DATE: 4-30-19

Conditions of Approval (if any):